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ABSTRACT

This document is the text of a Congressional hearing called to examine prevention of alcohol abuse in American families. In her opening statement, Representative Lindy Boggs states that alcohol abuse is related to many problems confronting families including divorce, violence, and behavioral emotional problems and that the purpose of this hearing is to focus on preventing alcohol abuse. Witnesses giving testimony include researchers; government administrators; representatives from advocacy groups, the alcohol industry, and the National Association of Broadcasters; counselors; and parents. Witnesses called for increased alcoholic beverage taxes, warning notices in alcohol advertising, and funding for various agencies. Prepared statements and materials submitted by witnesses and others comprise a large part of this document. These prepared materials include statements of social responsibility, public alcohol education program summaries and brochures, local government reports, newspaper clippings, and policy statements. (ABL)

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PREVENTION OF ALCOHOL ABUSE IN AMERICAN FAMILIES

HEARING

BEFORE THE

SELECT COMMITTEE ON CHILDREN, YOUTH, AND FAMILIES HOUSE OF REPRESENTATIVES

NINETY-NINTH CONGRESS

FIRST SESSION

HEARING HELD IN WASHINGTON, DC, ON MAY 2, 1985

Printed for the use of the
Select Committee on Children, Youth, and Families

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PREVENTION OF ALCOHOL ABUSE IN AMERICAN FAMILIES

THURSDAY, MAY 2, 1985

House of Representatives, Crisis Intervention Task Force, Joint With Prevention Strategies Task Force, Select Committee on Children, Youth and Families,

Washington, DC.

The committee met, pursuant to call, at 9:05 a.m., in room 2257, Rayburn House Office Building, Hon. Lindy (Mrs. Hale) Boggs, presiding.

Members present: Representatives Boggs, Lehman, Weiss, Anthony, Levin, Wheat, Coats, Wolf, Burton, McKernan, Monson, and Smith.

Staff present: Alan J. Stone, staff director and counsel; Marcia Mabee, professional staff; Christopher Reynolds, minority professional staff; and Joan Godley, committee clerk.

Mrs. Boggs. Good morning. The hearing will come to order.

I want to thank all of you, and to welcome all of you to this second Crisis Intervention Task Force hearing of the 99th Congress, which is being held jointly with the Prevention Strategies Task Force.

At our first hearing, on March 18 of this session, we learned that alcohol abuse is connected to many of the most serious problems that American families face: Separation and divorce; family violence of every sort; a host of emotional and behavioral problems in young people, including delinquency, running away from home, even suicide.

Today our focus is on preventing these tragedies. There are many possible approaches that have been attempted and studied. Some approaches involve tighter control of alcohol availability, others stress community and school-based education. Some efforts successfully combine both regulatory and education measures. Many individuals and organizations hold distinct opinions about what is most effective. Some, like the National Council on Alcoholism, have issued policy statements about prevention approaches.

This morning we will hear about a range of possible alcohol abuse prevention methods. We will be assisted in our exploration by researchers, a Federal and a local government administrator, representatives from advocacy groups, the alcohol industry, and the National Association of Broadcasters.

We will also hear from counselors, parents and a high school student whose life has been touched by a school-based prevention program.

I would like to issue a very special welcome to Tim Reid, the costar of the CBS series "Simon and Simon." We are so pleased that he has interrupted a very busy schedule to come across the country to join us this morning and to share his knowledge and experience.

And finally, I would like to thank the National Association of Broadcasters for their very generous assistance in providing video equipment for use by our witnesses this morning.

I would like to defer to my colleague, Mr. Coats. And I would like to make the announcement that we are under very heavy time restraints. It is unfortunate that we are. But I would like for the members of the committee, if they will, to keep their opening statements short and to submit a written statement for the record if they choose.

[Opening statements follow:]

OPENING STATEMENT OF HON. GEORGE MILLER, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF CALIFORNIA, AND CHAIRMAN, SELECT COMMITTEE ON CHILDREN, YOUTH, AND FAMILIES

Today's hearing reflects the deep interest of our Members, on both sides of the aisle, to prevent the family wreckage caused by alcohol abuse.

This is our second hearing in this series. It has been called quickly because we have been convinced of the severity of alcohol abuse in America.

We have also become convinced that many, if not all, of the serious tragedies which befall families, from family violence to runaway youth to criminal activity, have a high alcohol abuse factor.

We have also become convinced that much of this human trauma and the tens-of-billions in lost productivity and medical costs, is largely preventable. Today's hearing will give us the information base on prevention strategies that we need. As always, we will look at successful models, and we will talk to students, teachers, researchers, and industry representatives.

There is a great deal of discussion today in the country about who is to blame for teenager drunk driving. There is some anger at the criminal justice system, and much grass roots activity directed at stopping the slaughter. There is a great deal of discussion about the connection between advertising and alcohol abuse, as well.

We do not pre-judge these issues. We are here to learn.

I am certain that prevention works, and that we don't invest enough in it. I am also certain that government, industry, and the nonprofit sectors will all have to invest more, and work together better, than they do now.

In regard to industry efforts, I'd like to note the positive role the California wine industry has played and its many initiatives including the California mobilization for action programs, in effective partnership between private and voluntary groups to reduce alcohol problems.

It is my hope that, after today's testimony, we will have many such examples to draw on, as we proceed to find some solutions to the problem of alcohol abuse in American families.

OPENING STATEMENT OF HON. LINDY BOGGS, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF LOUISIANA, AND CHAIRWOMAN OF TASK FORCE ON CRISIS INTERVENTION

I want to welcome all of you to the second Crisis Intervention Task Force hearing of the 99th Congress, which is being held jointly with the Prevention Strategies Task Force.

At our first hearing, on March 18th of this session, we learned that alcohol abuse is connected to many of the most serious problems that American families face—separation and divorce, family violence of every sort, a host of emotional and behavior problems in young people, including delinquency, running away from home, even suicide.

Today, our focus is on preventing these tragedies. There are many possible approaches that have been attempted and studied. Some approaches involve tighter control of alcohol availability, other stress community and school-based education. Some efforts successfully combine both regulatory and education measures. Many individuals and organizations hold distinct opinions about what is most effective. Some, like the National Council on Alcoholism, have issued policy statements about prevention approaches.

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I would like to issue a special welcome to Tim Reid, costar of the CBS series Simon and Simon. We are very pleased he has interrupted a very busy schedule to come across the country to join us this morning and share his knowledge and experience.

Finally, I would like to thank the National Association of Broadcasters for their very generous assistance in providing video equipment for use by our witnesses this morning.

PREPARED STATEMENT OF HON. DAN BURTON, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF INDIANA

Without a doubt, all of us here, whether or not we chose to drink alcoholic beverages, have been impacted by the abuse of alcohol. Some of us unfortunately may have suffered personal tragedies--the loss of a family member, a loved one, others of us have family or friends who have experienced the horrors either directly or indirectly of this chronic national problem.

We've all seen the endless statistics, the numbers on paper of deaths, etc. from this sickness. And many of us have seen the positive affect of the recent public service spot on national television to the tune of Michael Jackson's "Beat It" which shows teenagers getting into a car, having just consumed too many beers at a popular night spot, and turning the key—instantly transforming into skeletons. Ask your young son or daughter if he or she gets that message!

Without telling you what you already know, and perhaps have seen, I want to share with you excerpts from a letter I recently received from someone aware that these hearings would be held. I offer you the following comments:

Dear Rep. Burton: I am 32 years old, a wife, and a mother. For as long as I can remember being consciously aware of life in this world, my life and my family's lives—our Thanksgivings, Christmases, fourth of Julys, my graduation from high school and college—have been dominated by the abuse of alcohol. I'm talking of my father—now 64, and still very much alive. Life with my father is best described as life with a time bomb. We never knew—from one day to the next—when that bomb will go off; and when either his life, or the lives of other innocent people, will end tragically, victims of his sickness--by simply being on the same road with him at that fatal moment when something triggers him into drinking. My father has never been treated, or has never sought help. He recently retired from 35 years on the same job, with a company, ironically, that had—early on—an alcohol rehabilitation program for its employees. It was a good one, but he would never participate, because, like many alcoholics, he has never admitted he has a problem—only that he knows he cannot drink!

My father is such a kind and giving man—when he's sober, which might be months at a time. However, when he's drinking, he literally experiences a Dr. Jekyll and Mr. Hyde transformation; he even looks different physically, and never remembers the days and perhaps weeks of drinking, and the verbal and physical abuse he gives those he loves.

That's merely my brief account Rep. Burton. Only one statistic in many. I urge emphasis on treatment for the family of the victim in cases like mine—because all of our lives are very different because of my father's sickness.

I chose to remain anonymous.

To Committee members, I submit this statement for the record, and thank you.

OPENING STATEMENT OF HON. DAN COATS, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF INDIANA, AND RANKING MINORITY MEMBER, SELECT COMMITTEE ON CHILDREN, YOUTH, AND FAMILIES

I am pleased that this Committee is continuing to address the problem of alcoholism and the family. This second hearing focuses on the subject of prevention.

I am convinced that the key to preventing or altering behavior is in changing attitudes. What we will be hearing today is how best to change these attitudes, so we can prevent at least some alcohol abuse from occurring. The alternative is simply spending even larger sums of money to treat the results of alcohol abuse, without addressing the means to prevent the abuse from initially occurring.

Madame Chairman, allow me to briefly mention a program that has been initiated in northeastern Indiana that is an excellent model for alcohol abuse prevention.

Our community has joined an effort by broadcasters nationally to promote Operation Prom/Graduation in some unique ways. The goal is to encourage high school juniors and seniors to sign cards pledging not to drink and drive during the 1985 prom/graduation season, nor ride with any student who has been drinking alcohol and driving.

In Fort Wayne, ten radio and all five television stations are working together to promote this program. Students can then be eligible for discounts at over 100 locations around town. Some, such as Rax Restaurants, have put it on their marquees to advertise to students about their discounts.

In addition, local television and radio stations, plus four associations—floral marketing, new car dealers, restaurant owners and soft drink manufacturers—are each contributing cash amounts for an award that will be given to the school with the largest accident free participation in the program to help offset the cost of next year's prom and graduation expense.

This effort, led by WTPA-TV Fort Wayne General Manager and Indiana Broadcasters' Association head Ed Metcalfe and Bob Elliott, General Manager of WQHK and WMEE radio, is a high profile effort. It will also undoubtedly have long-term impact on the attitudes of the students who participate as well as those younger and older who become aware of the program.

In addition, the Students Against Drunk Driving (SADD) organization plans a SADD fest on May 5th at the Grand Wayne in Fort Wayne with exhibits, slide shows, concessions and a sock hop.

Chairman George Miller and I have also been coordinating an effort here in Congress to promote the showing of the excellent program "One Too Many" in high schools across the nation. In northeastern Indiana many high schools have already scheduled showings to junior and senior students. This program will be aired on May 21 over the ABC television network. In Fort Wayne this will be followed by a special one-hour locally produced program. During this same time period, a speaker bureau has been organized that includes broadcasting representatives, MADD (Mothers Against Drunk Drivers), the detoxification facility Washington House, the Indiana State Police, the alcohol countermeasures program of the Allen County Superior Court and Indiana Governor Orr's task force on drunk driving.

It is this type of effort that we are looking for—specific target programs that really help alter behavior on a voluntary basis and ideas that can help change attitudes. Too often we get generalizations and promises that have good intentions cost lots of money, but have unintended consequences and don't target those whom they are trying to reach.

This northeastern Indiana effort demonstrates the involvement of the various major players we will hear from today—the impact of the media, activities organized by the private sector, and programs in our schools—all working together as a community effort.

I'm proud of this type of leadership in northeastern Indiana and I'm looking forward to hearing today about other's efforts in this area.

Mrs. BOGGS. I would like now to turn the hearing over to Mr. Coats.

Mr. COATS. Thank you very much, Madam Chairman. I am pleased that this committee is continuing its efforts to address the problem of alcoholism and its effects on the family and on individuals. This second hearing focuses on the subject of prevention, which I think is a very logical follow-up to our initial hearing.

I am convinced that the key to preventing or altering behavior in this regard is to change attitudes. What we will be hearing today is how best to change those attitudes, so that we can prevent at least some alcohol abuse from occurring. The alternative to changing these attitudes is simply to spend ever greater sums of money to treat the results of alcohol abuse without addressing the means to prevent the abuse from occurring initially.

Madam Chairman, allow me, briefly, if I could, to mention a program that has been initiated in northeastern Indiana that is an excellent model for alcohol abuse prevention.

Our community has joined an effort by broadcasters nationally to promote Operation Prom/Graduation in some very unique ways. The goal is to encourage high school juniors and seniors to sign pledge cards indicating they will not drink and drive during the 1985 prom/graduation season, nor ride with any student who has been drinking alcohol.

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This effort, led by WTPA-TV Fort Wayne's, general manager, and Indiana Broadcasters' Association head, Ed Metcalfe, plus Bob Elliott, general manager of WQHK and WMEE radio in Fort Wayne, is a high profile effort. It will undoubtedly have long-term impact on the attitudes of the students who participate as well as those younger and older who become aware of the program.

In addition to this, the Students Against Drunk Driving organization plans a SADD fest on May 5 at the Grand Wayne Center in Fort Wayne with exhibits, slide shows, concessions and a sock hop.

Chairman Miller and I have also been coordinating an effort here in Congress to promote the showing of the excellent program "One Too Many" in high schools across the Nation. In northeastern Indiana many high schools have already scheduled showings to juniors and seniors. This program will be aired on May 21 on national television. In Fort Wayne we are following this up with a special 1-hour locally produced program to emphasize the point that the film is trying to make.

We have organized speakers bureaus, including broadcasting representatives, Mothers Against Drunk Drivers, the detoxification facility in Fort Wayne, Washington House, the Indiana State Police, the alcohol countermeasures program of the Allen County Superior Court, and Indiana Governor's Task Force on Drunk Driving.

As you can see, it is a comprehensive effort involving many segments of our community looking for specific programs that can help alter behavior on a voluntary basis and to promote ideas that can help change these attitudes. Too often we get generalizations and promises that have good intentions and cost a great deal of money, but have unintended consequences and really don't target those whom we are trying to reach.

I think this northeast Indiana effort demonstrates the involvement of many from our area and the involvement of many of those whom we will hear today. The impact of all of us working together as a community, and all segments of the community pulling together, can have some dramatic impacts in terms of alcohol prevention.

And I am proud of this effort in northeast Indiana, of the efforts of the many people that will testify before us today, and look forward to hearing about other efforts dealing with this important subject.

And I thank the Chair for the opportunity to pass that on.

Mrs. Boggs. Thank you very much, Mr. Coats.

We welcome Mr. Lehman, Mr. Monson, and Mr. Smith to the panel.

We have 11 splendid witnesses and a time constraint of being out of the room at 12 o'clock. I had asked earlier if the members of the panel would like to either simply submit their opening statements for the record or to keep them very short and submit the written statement to the record, if you will.

Mr. Lehman.

Mr. Lehman. I just want to thank Mrs. Boggs for starting this meeting. I would submit my statement for the record.

I just remember one thing when I was teaching school about 15 years ago, and it was a parent whose child was arrested for drunken driving. His first statement was, "Thank God. I thought he might have been smoking marijuana." What we have to do is realize that alcohol is a drug and it is just as dangerous as any of the other drugs that young people can be addicted to.

And also, as we found out in our National Highway Traffic Safety hearings, alcohol does not stand alone. Most of the time the people that are taking alcohol usually take it in combination with other forms of drugs to make it even more detrimental.

Mrs. Boggs. Thank you very much, Mr. Lehman.

[Opening statement of Congressman William Lehman follows:]

Opening Statement of Hon. William Lehman, a Representative in Congress From the State of Florida, and Chairman, Task Force on Prevention Strategies

It is my pleasure to join my colleague, Mrs. Boggs, and the members of the select committee in welcoming you to our second hearing on the issue of alcohol abuse and families.

In our first hearing, families, noted researchers and program directors told us about the enormous dimensions of problem drinking, its impact on the abuser and others, and its connection to many areas of family dysfunction. Also, as chairman of the Transportation Appropriations Subcommittee, I have heard on many occasions a great deal about the devastation that can be wrought by drunk drivers.

Our first hearing provided extensive information on the problems and some model approaches for intervention. Today we will hear from witnesses regarding issues and strategies aimed at preventing alcohol abuse and its consequences. We all know that prevention makes good sense, works, and can be tremendously cost effective. Yet, prevention efforts in this area, like many other areas, still are relatively small.

With alcohol abuse costs of $116.7 billion to the nation in 1983, can there be any question about the need for responsible action?

A number of preventive approaches and practices have been successful in helping to reduce consumption and to change attitudes in the direction of more responsible drinking practices. This morning we will learn more about this variety of educational activities, as well as legal and regulatory efforts.

My appreciation to all of the witnesses who have taken the time to be with us today and to inform us on this important subject.

Mr. Monson of Utah.

Mr. Monson. Thank you very much. I appreciate the chance to be here today. I will not make a lengthy statement. I just want to thank you for scheduling this and look forward to the testimony that will be given to help us better understand how we can deal with this most important problem.

Mrs. Boggs. Thank you so much.

Mr. Smith of New Hampshire.

Mr. Smith. I have no comment now.

Mrs. Boggs. Thank you so much, Mr. Smith.

Well, we will begin now with our first panel, and we would like, please, to come to the witness table Mr. James Mosher, who is the associate director for policy studies, Prevention Research Center, Pacific Institute for Research and Evaluation, from Berkeley, CA; and Mr. Alfred Regnery, who is the Administrator of the Office of Juvenile Justice and Delinquency Prevention, the Department of Justice, from Washington, DC.

We thank you both very much for being with us, and we look forward to your valuable participation.

Mr. Mosher.

STATEMENT OF JAMES F. MOSHER, ASSOCIATE DIRECTOR FOR POLICY STUDIES, PREVENTION RESEARCH CENTER, PACIFIC INSTITUTE FOR RESEARCH AND EVALUATION, BERKELEY, CA

Mr. Mosher. Thank you very much. My name is James F. Mosher. I am the associate director for policy studies for the Prevention Research Center of the Pacific Institute for Research and Evaluation. I am also secretary of the Council on Alcohol Policy of the National Association for Public Health Policy. The Council on Alcohol Policy is a nonprofit organization seeking changes in public health policy affecting alcohol, and should be distinguished from the organization called the Alcohol Policy Council. Unlike that council, we do not accept any industry funding in our efforts.

As associate director for policy studies at PRC, I work in the only institute in the country that is focusing specifically on environmental approaches to the prevention of alcohol problems. My goal today is to briefly describe the environmental approach to prevention and its relationship to other prevention strategies including many that have already been mentioned today, and the need to reexamine public policies affecting the role of alcohol in our society.

I am going to be very brief. I have submitted written testimony that I think you all have, and hope that there will be time for questions.

What is the environmental approach? Our Institute works closely with the School of Public Health at Berkeley, and we have been using research in the public health field generally and applying it to the alcohol field. It means going upstream. And what I mean by that is that instead of focusing on those who have already suffered alcohol problems, we must go upstream and look at the causes, trying to affect the social community conditions that put people, particularly children, at risk.

I won't review the statistics on the health consequences of alcohol consumption. This is a very serious health problem for us all, as you know. It affects literally millions of young people in our society.

Traditionally, prevention has been relegated to formal education. In recent years, we have seen some major advances. The mass media has made some commendable efforts. Deterrence has become a very important strategy. We have seen this particularly in the area of preventing drinking and driving. However, all of these strategies are aimed at changing individual behavior, and they ignore the risk factors that we are trying to study at our Center, which involve the more environmental or societal conditions.

If you implement strategies aimed at individuals only and you do so in an environment that is hostile to the changes that you are trying to foster, then there is very little likelihood of success. For example, one of the main messages we want to get across to children is that alcohol is, in effect, a very special beverage, that it is a drug. But yet, today, we find that alcohol is in competition with other non-alcoholic beverages and increasingly is treated as an ordinary beverage. In fact, this is a major strategy for marketing of alcoholic beverages. As a result of this, when you ask children about alcohol—and this was done recently—you find that most of those responding don't even know that alcohol is a drug. If you use education as a strategy, and you do so in a hostile environment, you are unlikely to get your message across.

In my formal testimony I do discuss some of the marketing strategies that are used today in promoting alcoholic beverages—how these strategies push toward making them ordinary beverages, trivializing the consumption of alcohol as something you should do anytime, anyplace.

I am not calling for any policies that are not already in use. What I am calling for are changes in those policies. We already have policies on the taxation of alcoholic beverages, on the availability of beverages and on the use of alcohol in the media, the three major policy areas I discuss in my written testimony. For example, our excise tax policy hasn't been changed, except a relatively small increase in distilled spirits taxes taking effect this year, since 1951. As a result of the failure to increase taxes, which means keeping it apace of inflation, we now find that alcohol prices have decreased relative to inflation 28 percent and now is in competition in terms of price with other beverages.

According to recent studies by Michael Grossman in New York, price is a very, very effective means for reducing the consumption of alcoholic beverages among young people. And I might add this reflects research conducted regarding the effect of tobacco excise taxes on the incidence of smoking among young people.

I want to, in closing, clarify two myths. One is that in examining these public policy options regarding availability of alcoholic beverages, taxation, and advertising on television, we are not advocating changes only in these areas without relying on other strategies. There has to be a coordinated effort that include the commendable efforts to change the media content, the various voluntary programs, and the other efforts we have in our society including deterrence measures and the minimum drinking age. These are all very, very important aspects of the puzzle. But if we leave out the public policy elements, we are going to have a very difficult time dealing with alcohol problems effectively.

Second, this is not a question of prohibiting alcoholic beverages. What we have found in the public policy area are huge pendulum swings: Either we have to completely prohibit alcohol or we have to make it available anytime, anywhere as an ordinary beverage. What we need to do is find a healthy mean. My organization and research institute are not interested in reinstituting prohibition, we are interested in finding a public health policy approach to alcohol policy that will reduce the risk of alcohol while making it available in a responsible manner.

Thank you very much.

Mrs. BOGGS. Thank you very much.

[Prepared statement of James F. Mosher follows:]

PREPARED STATEMENT OF JAMES F. MOSHER, ASSOCIATE DIRECTOR FOR POLICY STUDIES OF THE PREVENTION RESEARCH CENTER OF THE PACIFIC INSTITUTE FOR RESEARCH AND EVALUATION, AND SECRETARY OF THE COUNCIL ON ALCOHOL POLICY OF THE NATIONAL ASSOCIATION FOR PUBLIC HEALTH POLICY

My name is James F. Mosher, Associate Director for Policy Studies of the Prevention Research Center of the Pacific Institute for Research and Evaluation and Secretary of the Council on Alcohol Policy of the National Association for Public Health Policy. I am an attorney who, for the last ten years, has specialized in the study of public policies affecting the prevention of alcohol-related problems.

I greatly appreciate the opportunity to address this Committee and to provide you with a new, comprehensive perspective on the prevention of alcohol-related problems among our nation's youth.

Alcohol is by far the most abused drug in the United States today, and constitutes the number one health problem among young people. Alcohol-related motor vehicle crashes is the leading cause of death among those under 25 years of age and approximately 1,000 young children die each year of alcohol-related causes. Thousands more young lives are shattered by crippling injuries and other alcohol-related problems. And the problems extend to children's immediate environment—the family. According to a recent Harris poll, 56 percent of all respondents report that a member of their family or a close friend drinks too much. Family violence, family breakups and child abuse, increasingly recognized as serious public health problems in the United States, are closely associated with heavy alcohol consumption.

These statistics suggest the need for a vigorous, comprehensive alcohol policy aimed at preventing alcohol-related problems. During the last twenty years, important strides have been made, notably in a commitment to school-based education efforts, increased availability of treatment programs, more mass media campaigns and more effective deterrence policies, particularly regarding drinking and driving. Prevention, however, requires a far broader set of goals and agendas. Individuals, particularly young people, act within a social, economic and cultural environment that shapes the choices available to them. The missing components in current alcohol policy is precisely the examination of these broader factors—how they are shaped and what public policy options are available to us as a society to change them.

ALCOHOLIC BEVERAGES AND BEVERAGE MARKETING

A first step in such an examination is to review the extent and operations of the alcohol market. Over $60 billion is spent each year by U.S. consumers to purchase alcohol, and alcohol producers have developed sophisticated, expensive promotional techniques to capitalize on the market's immense profitability. The alcoholic beverage industry operates on four fronts to exploit the alcohol market: increased availability ("place"), price differentials, with low overall relative price, introduction of new beverages ("product") and intense promotional campaigns. These four "P's," standard marketing techniques, are carefully coordinated to maintain and expand alcohol consumption, a strategy termed "total marketing" by industry experts.

A central tenet in the "total marketing" of alcoholic beverages is that alcohol is in competition within the "beverage market." Consumers will consumer only so much liquid (estimated by industry analysts at one-half gallon per day) and all beverage producers are vying with each other for that limited market. Thus, beer, wine and distilled spirits are competing with each other as well as with soft drinks, coffee, tea, fruit juices, etc.

Exploiting the beverage market requires a coordinated use of the four "P" strategies to create a social environment where alcohol is treated as an ordinary beverage. Alcohol has traditionally been viewed as a "Special" beverage appropriate to be used in particular places at particular times. These barriers are being systematically broken down by industry marketing efforts which have as their goal making alcohol consumption appropriate any time and any place.

The effort to "trivialize" alcohol consumption—to make it on a par with drinking soft drinks or fruit juices (only with a desirable "punch")—is combined in the total marketing strategy with consumer targeting—that is, the delineation of consumer subgroups and the development of coordinated marketing strategies aimed at each group. Young people, the "entering consumers," are a critical group to target, as are heavy drinkers. Examples of targeting using the four "P's" abound in our social environment. Sports figures in advertising; campus promotions; sweeter, lighter beverages; differential prices; advertising on youth-oriented radio stations; and increased availability in convenience stores, grocery stores, fast food outlets, even gas stations are examples of targeting often aimed directly at young people. These marketing strategies have a profoundly negative impact on our nation's health. They undermine other prevention and treatment efforts; they glamorize alcohol and encourage individuals, particularly youth, to treat what is a potentially dangerous drug as an ordinary beverage; and they contribute to a host of social and health problems.

POLICY ALTERNATIVES

Our communities, states, the federal government, and industry have the tools to reverse these alarming trends and practices, which have, until recently, been largely ignored by public health professionals. Reports by the National Academy of Sciences, numerous international bodies including the World Health Organization, the American Assembly, several state commissions, and many eminent scholars are now calling for public policies which will provide more health-oriented messages in our social and cultural environment. These policies are not aimed at eliminating alcohol. Rather they are designed to minimize the risk of alcohol consumption in social settings while still making alcohol available in a responsible and appropriate manner. And they complement and enhance treatment, education and deterrence strategies that are now being relied upon.

Alcohol taxes: I would like to focus primarily on alcohol prices as a variable, to illustrate the broad policy issues that I have raised. Perhaps the most neglected, and possibly the most effective policy tool available to the public for the prevention of youthful drinking problems is the appropriate use of excise taxes. Over the last 30 years, the effective federal and state excise tax rates have diminished steadily, particularly for beer, the beverage of choice among young people. This has resulted in cheaper and cheaper beer (a 28% relative decrease in price since the 1950's), such that today it is price-competitive with soft drinks. This fact has been a central component in the marketing strategies or beer producers in targeting the youthful drinking market. Extensive research has shown that alcohol is price-elastic and that reductions of per capita consumption will cause a reduction of alcohol-related problems, including cirrhosis of the liver, alcoholism, heavy drinking, and drunk driving. Recent research conducted by Michael Grossman, an economist at the Bureau of Economic Research in New York City, demonstrates that these effects are particularly prevalent among young people, which is in accord with similar research regarding tobacco prices and tobacco use. According to Grossman and his associates, a modest increase in excise taxes will have as great or greater effect on adolescent drinking as an increase in the drinking age from 18 to 20.

I therefore urge this committee to recommend legislation that will substantially increase the federal excise tax on all alcoholic beverages and equalize taxes on wine, beer, and distilled spirits according to alcohol content, and to reexamine other federal tax and price policies affecting alcoholic beverages.

Other policy options: Similar policy analyses should be conducted regarding alcohol availability and alcohol marketing campaigns. Legislation should be enacted to encourage implementation of responsible server practices, including comprehensive state dram shop liability laws (whereby servers of alcohol may be made liable for injuries caused by intoxicated patrons) that provide a defense for responsible business practices. (The Prevention Research Center has drafted a model dram shop liability act pursuant to an NIAAA grant that includes such a provision. It is being submitted to this committee as part of this testimony. Communities and states should also develop detailed alcohol availability plans, which establish the number, type and location of alcohol outlets that offer the least danger to the public, particularly regarding sales to minors or potential drunk drivers.

Government policies and industry practices regarding alcohol advertising and marketing should also be reexamined. Equal time on broadcast media for health messages; bans on all marketing of alcoholic beverages on college campuses; and health warnings on all advertisements are among the policy options available. These will help to counteract the deceptive, glamorizing messages that now inundate our environment and will augment educational programs and the recent efforts to change the portrayal of alcohol on television.

Finally, research agencies at the federal level should be greatly expanded and refocused to insure that necessary statistical, programmatic and evaluate data relevant to prevention policies are collected and analyzed. NIAAA's current research budget is woefully inadequate, particularly regarding prevention research.

CONCLUSION

These public policy initiatives can be powerful tools in shaping youthful drinking patterns. It makes little sense to give one set of health information in a school program when our communities are barraged with promotions for alcohol that glamorize alcohol use; when alcohol is increasingly available in a wider and wider set of social occasions and commercial settings; when alcohol is offered at prices that are the same or less than other beverages; and when alcohol is explicitly characterized in the I.R.S. Code as ordinary and necessary to the conduct of our nation's business.

Alcohol problems are community and social problems requiring a collective commitment to change. We as a society must be willing to reexamine our drinking norms and expectations and to create healthy drinking environments before we can expect our children to make informed choices regarding the use or nonuse of alcohol. The stakes are too high for us to do otherwise. Thank you.

Mrs. BOGGS. We will go on to the next witness, and then we will have questions following his testimony.

Welcome, Mr. Administrator.

STATEMENT OF ALFRED S. REGNERY, ADMINISTRATOR, OFFICE OF JUVENILE JUSTICE AND DELINQUENCY PREVENTION, DEPARTMENT OF JUSTICE, WASHINGTON, DC

Mr. REGNERY. Thank you. I am the Administrator of the Office of Juvenile Justice and Delinquency Prevention at the Justice Department. And it pleases me particularly to be here today in light of your comments, Mrs. Chairman, regarding delinquency and other problems.

We, of course, have the responsibility in the Federal Government for controlling and preventing delinquency, and it goes without saying that drug and alcohol abuse among teenagers is a very real factor in delinquency and something which is very often present. Drug abuse, or drug use at all among teenagers is, in fact, delinquency and we make that very clear. But perhaps even more than that, it is one of the antecedents to delinquency. Drug and alcohol use is probably one of the easiest, or perhaps the easiest, type of rebellion that young people engage in and this often leads in one way or another to delinquent behavior. Therefore, it is certainly in our interest to do what we can to try to prevent drug and alcohol abuse.

In that light, one of the things that we have done in my office is to take on the responsibility of pulling together the numerous and diverse groups across the country that are interested in drug and alcohol abuse prevention among teenagers. As we looked at the issue, it occurred to us that with our limited resources there really wasn't too much new that we could do, but that there were a great many things that were going on around the country but which in many cases were, unfortunately, not as well coordinated as they should be. And we felt that if we could help those people become better coordinated their efforts might be more efficient.

Therefore, what we did was to assemble a list of the different people we found to be interested in preventing drug and alcohol abuse among young people. Those included such diverse interests as the media and the advertising people, the beer and alcohol distillers and manufacturers, corporations, unions, churches, interest groups, service organizations, and a whole host of other people; many of whom came at it from a different perspective but who had the same goal ultimately in mind, and that was preventing drug and alcohol abuse among young people.

What we, therefore, did was to host a series of meetings with different groups of these people with the eye toward eventually forming what we call a national partnership. We have had five of those meetings so far in the last 6 to 8 months, the last of which was in January in Williamsburg. We had representatives from over 150 different organizations there; and it was a rather difficult process I would say because of the many different interests. We were able to assist them in coming to sort of a unified goal, although, as I say, with a variety of different approaches toward coordinating their efforts in the prevention area.

That effort is progressing well. I think that you will hear from some of the people today who have been involved in the partnership effort. They are in the process of forming a 501(c)(3) organization and choosing members of a steering committee which will ultimately run the organization. We have had very gratifying support from virtually everybody that we have contacted about the project. I don't know that there is anybody who has not participated, as a matter of fact. I think that it is the sort of effort that we in the administration look so warmly toward, what we call a public-private partnership: using the resources of the private sector as well as the resources of the public sector, with our ability to coordinate and call meetings and so on to get people to work together to do something that I think virtually everybody in the country agrees is something that is so important for our young people.

And again, we look at it from the perspective of delinquency and aberrant behavior among young people, but it is a much broader problem than that, of course. As you know, drug and alcohol abuse is something that affects far too many of our young people. The prevention side of the whole equation is probably the most important one. We at the Justice Department spend a great deal of money on control, but we have a number of other prevention activities going on as well. The Drug Enforcement Administration, for example, as you may know, has a rather impressive effort using athletes to convince young people not to use drugs and alcohol. And with a number of other efforts, we feel that by adding the prevention side to the equation we will be better able to ultimately control the use of drugs and alcohol.

And in that light I think the partnership that we have put together offers a great deal of hope. I think it is something that ultimately will, if anything can, assist us in our prevention efforts simply because of the very diverse interests and the very, really amazing participation we have had.

I do have a prepared statement and, also, with my prepared statement is a brief history of the partnership that tells exactly what we have done so far. I would ask that that be placed in the record in full.

Mrs. BOGGS. It will be placed in the record in full. Thank you very much.

[Prepared statement of Alfred Regnery follows:]

PREPARED STATEMENT OF ALFRED S. REGNERY, ADMINISTRATOR, OFFICE OF JUVENILE JUSTICE AND DELINQUENCY PREVENTION

Mr. Chairman, I am pleased to describe for the Subcommittee the role of the Office of Juvenile Justice and Delinquency Prevention in fostering private sector attention to the issue of drug and alcohol abuse prevention.

As you may know, a recent study estimated the costs of drug abuse to be $49.6 billion annually, including crime costs, lost productivity, and medical expenses. The costs of alcoholism have been estimated at $116 billion per year.

Perhaps the most frightening costs, however, are in terms of human life. In the last 20 years, the death rate of every age group in America except one has decreased significantly. That one exception is among 15 to 24 year olds. Most of that group's increase can be attributed to drunk driving and other drug-related deaths.

When we talk about drug and alcohol abuse control, we usually refer to three separate activities. The traditional and most common avenue of control is drug law enforcement. The second activity is drug and alcohol abuse treatment, which is medical or counselling assistance to those already engaged in substance abuse. Finally, there is prevention.

Clearly, the focus of our efforts in this country has been on enforcement. But it is generally recognized that we can not control the substance abuse problem by means of enforcement alone. Thus, if drug and alcohol abuse cannot be completely controlled through the supply of substances, we must look more closely at the issue of demand. Under this scrutiny comes the entire issue of prevention.

The Office of Juvenile Justice and Delinquency Prevention recognized that it could play a significant and appropriate role concerning substance abuse prevention by providing a forum for citizens and private sector organizations to discuss the problem and to take actions individually and collectively to attack the problem. Thus was born what we call the National Partnership to Prevent Drug and Alcohol Abuse. The National Partnership is an outgrowth of what was already a significant grassroots movement to fight the substance abuse problem, particularly among parents.

MADD, Mothers Against Drunk Driving, is probably the most visible among the hundreds of citizens groups already concerned with some aspect of drug and alcohol abuse. Also active are the National Federation of Parents and the 11,000 Chemical People Task Forces. In addition to the involvement of churches and service organizations such as the Boy Scouts and PTA, businesses and union groups have also realized that, in addition to the human cost, substance abuse is a business cost, taking millions of dollars from wages and profits in lost productivity.

We found, however, that there was no coordination or communication among these groups and their activities. To help them come together, OJJDP hosted meetings of representatives of organizations concerned about substance abuse. These meetings led to the formation of the National Partnership.

Mr. Chairman, I would like to submit for the record a brief history of the Partnership and I will be pleased to answer any questions you or members of the Subcommittee may have.

HISTORY OF THE NATIONAL PARTNERSHIP TO PREVENT DRUG AND ALCOHOL ABUSE

The National Partnership to Prevent Drug and Alcohol Abuse is the product of meetings hosted by the Office of Juvenile Justice and Delinquency Prevention (OJJDP), U.S. Department of Justice. The Partnership seeks to allow diverse groups and organizations to attack the problems related to alcohol and drug abuse that are plaguing our society. A list of participating organizations is attached.

The National Partnership has structured itself into five working groups:

Media group: This was the first group to meet and it includes representatives from the television and radio networks, the writers and directors of television shows, and advertising agencies, and also involves producers of alcoholic beverages.

Citizen group: This group is made up of individuals and organizations who are working in the area of substance abuse on a "nonprofessional" basis. Included in this group are general membership service organizations, charities, and parent groups.

Business group: This group is drawn from all sectors of the business community. Business experiences drug and alcohol abuse both as a human problem and as a cost of doing business through workers' compensation claims, absenteeism, and lower productivity. This group also includes insurance companies who are concerned with the loss experience of their clients and representatives of the growing number of Employee Assistance Programs (EAP).

Professional group: This group is composed of people who are private professionals involved with the drug and alcohol abuse problem. Members include physicians, educators, lawyers and rehabilitation professionals.

Government group: This group is made up of agency heads representing Federal, State, county, and local governments. Also included are judges, police officers, district attorneys, governors, and mayors.

These groups each met individually during a 4 month period from October 1984 to January 1985. At these meetings, the participants explored problems, shared concerns, and discussed their aspirations for the Partnership. During this time, a Resource Book was also compiled. The Resource Book serves as a knowledge base for Partnership members to draw upon, and consists of its major sections of 1) information about trends, patterns, and extent of substance abuse; 2) information on research and theory concerning the causes and treatment of juvenile substance abuse; 3) brief group/corporate overviews of strategies used by Partnership members; 4) detailed descriptions of existing programs currently carried out by Partnership members.

The first meeting of the entire National Partnership was held January 29-31, 1985, at the Williamsburg Hilton and National Conference Center in Williamsburg, Virginia. The opening session included presentations regarding juvenile alcohol and drug abuse and the relationships between drug and alcohol abuse and mental health.

The formal misson and goals of the National Partnership were developed and agreed upon by the participants without dissent:

1. To promote the right of young people to grow up healthy.
2. To prevent self-initiated early experimentation with alcohol and drugs.
3. To increase the awareness and availability of alcohol and drug treatment services for youth.
4. To increase the availability of promising and effective preventive approaches to alcohol and drug problems.
5. To promote social disapproval of drunkeness.
6. To eliminate all use of illegal drugs.
7. To eliminate all use of alcohol by underage youth outside of parental supervision and liturgical functions.
8. To eliminate non-medicinal use of prescription drugs by youth.

The participants also identified, defined and agreed upon eight task force areas; those partnership members especially interested in specific areas signed up to participate in task force meetings at future dates.

Task Forces:

1. Organization of the National Partnership.
2. Education on drug and alcohol abuse, including dealing with negative peer pressure.
3. Positive Social Roles, including positive peer pressure.
4. Media, including mixed messages.
5. Family Life, including such issues as communication and family management as well as discipline.
6. Multi-Cultural Populations (this issue was to be kept in mind by all the issue-oriented Task Forces).
7. Sources and Availability of alcohol and illicit drugs (including enforcement issues).

TASK FORCE ACTIVITIES:

Since their creation in Williamsburg, the Task Forces of the National Partnership have been meeting separately and developing many promising activities for the National Partnership. The Organizational Steering Committee has filed the initial papers for incorporation of the Partnership as an independent 501(c)3 nonprofit organization. It has also developed a set of By-Laws which await adoption by the first Board of Trustees. The Media Task Force has developed a plan to export the collaborative process of the National Partnership to local communities. The central idea of this project is to broaden and enhance organization and groups currently fighting juvenile substance abuse. Finally, the National Partnership plans to meet in its entirely in mid-July in Washington, D.C. At this time, the members will discuss future goals, directions, and activities that the Partnership will undertake.

CITIZEN GROUP

The Cottage Program; Boys Club of America; B'nai B'rith Youth Organization; Youth for a Drug Free America; BACCHUS of the United States, Inc.; Benevolent & Protective Order of Elks; National Federation of Parents for Drug-Free Youth; Center for Science in the Public Interest; The American Council on Alcoholism; National Council on Alcoholism; Lions Club International; National School Boards Association; and the National Parent Teachers' Association.

League of United Latin American Citizens (LULAC); Chemical People—WQED; North Conway Institute; National Commission Against Drunk Driving; Hill & Knowlton; The Center for Pastoral Care; Juvenile Justice State Advisory Groups; Health Education Foundation; American Driver Traffic Safety Education Association; Girl Scouts of the U.S.A; Cody Communications; Students Against Drunk Driving; and Project PUSH.

Florida Governor's Commission on Drug & Alcohol Concerns; Big Brothers/Big Sisters of America; National Coalition for Drug Abuse and Alcohol Abuse; Pharmacists Against Drug Abuse; Young Men's Christian Associations of the United States of America; Association of Labor—Management Administrators and Consultants on Alcoholism, Inc. [ALMACA]; The Gallup Organization; National Conference of Catholic Charities; Subcommittee on Alcohol and Drug Use—Office of Senator Paula Hawkins; U.S. Jaycees; NAACP; Salvation Army; and The Congressional Family for a Drug-Free Youth.

National High School Athletic Coaches Association; National Association of Women Highway Leaders; Volunteers of America; National Association of Evangelicals; Rotary International; National Council of Churches; Mothers Against Drunk Drivers; Girls Clubs of America; Boy Scouts of America; Kiwanis International; General Board of Church and Society of the United Methodist Church; Phoenix House; and the Alternative Human Services Corporation.

Lions Club International; Volunteers of America; United Methodist Church; National Council on Community Mental Health Centers; and the DARE Project—Office of Substance Abuse Ministry.

CORPORATIONS

Weekly Reader Publications, Xerox Education Publication; Golin Harris Communications; Pfizer, Inc.; National Soft Drink Association; Insurance Information Institute; Keebler Company; Miller Brewing Company; AC Spark Plug Division of General Motors; Time, Inc.; IBM; Steele & Utz; McDonalds Corporation; and Scovill, Inc.

ITT; Geico Insurance Company; Revlon, Inc.; GTE; Johnson & Johnson; DuPont Company; Marion Laboratories, Inc.; Carnation Company; Gulf & Western Industries; Texaco, Inc.; General Foods Corporation; American Motors Corporation; and Beatrice Companies, Inc.

Squibb Corporation; Levi Strauss & Company; Transamerica Corporation; Up John Company; DC Comics; Exxon Corporation; Xerox Corporation; Kemper Insurance Company, Inc.; AFL–CIO; Nike, Inc.; Faberge; Schering-Plough Corp.; and the Northrop Corporation.

General Foods Corporation; Colgate Palmolive Company; Grand Union Company; Campbell Soup Company; Hill & Knowlton; Zenith Electronics; Pepsico, Inc.; Electronic Data Systems Corporation; Sterling Drug, Inc.; Control Data Corporation; Abbott Laboratories; G.D. Searle & Company; State Farm Life Insurance Company; and the American Pharmaceutical Association.

Proctor & Gamble Company; Burroughs Corporation; Borden, Inc.; Minnesota Mining & Manufacturing; Gillette Company; Travelers Life Insurance; American Express Company; American Medical International, Inc.; Warner Lambert Company, Inc.; Hershey Food Corporation; Blue Cross & Blue Shield; Diversifoods; and the Capital Center.

Chase Manhattan Bank; General Motors; HCA Psychiatric Company; Employee Health Services; Metropolitan Life Insurance Company; Bristol-Myers Company; Equitable Life Assurance Society; Northrup Corporation; The Coca Cola Company, Inc.; American Honda Motor, Inc.; Philip Morris, Inc.; McNeil Pharmaceutical; and the Ford Motor Company.

APPLE Computer, Inc.; Sears, Roebuck & Company; Southland Corporation; SmithKline Corporation; Avon Products, Inc.; Cheeseborough-Ponds, Inc.; Eli Lilly & Company; Citibank; and the U.S. Chamber of Commerce.

MEDIA GROUP

National Broadcasting Company; National Association of Broadcasters (NAB); American Association of Advertising Agencies (AAAA); Outdoor Advertising Association; United States Brewers Association (USBA); The Wine Institute; The Ad Council; American Advertising Federation; Distilled Spirits Council of the U.S. (DISCUS); National Beer Wholesalers' Association of America; Brigg Owens and Associates; Super Teams; and the Alcohol Drug Abuse Committee—Caucus of Writers, Producers, and Directors.

National Cable Television Association; Magazine Publishers Association; Entertainment Industries Council, Inc.; Alcohol and Drug Problems Association (ADPA); American Broadcasting Company; Stations Representative Association; Anheuser-Busch, Inc.; Adolph Coors Company; The Newspaper Center; Sports for a Drug Free America; Alcohol Policy Council; Television Bureau of Advertising; and the Miller Brewing Company.

National Broadcasting Company, Inc.; Association of National Advertisers, Inc.; National Radio Broadcasters Association; Federal Liaison Officer for the State of Michigan; American Advertising Federation; CBS, Inc.; Association of National Advertisers, Inc.; Alta Marea Productions; Wishnow Group, Inc.; National Radio Broadcasters Association; International Barometer Journal; McKenna, Wilkinson and Kittner; and the Association of Independent Television Stations.

National Federation of Independent Businesses; Commissioner, National Football League; Channel 13, WTZG—Toledo, OH; Radio Advertisers Bureau; Wires Limited; Turner Broadcasting; Ogilvy and Mather; KING T.V.—Seattle, WA; WETA 26—Washington, DC; Taft Broadcasting; Alcohol Issues Insights; Barton & Westland Associates; Communications Daily; and WDCA TV—Bethesda, MD.

WKRO FM—Cincinnati, OH; Drugs and Drug Abuse Education; Multinational Business Services; Wagner and Baroody; Camfel Productions; and the Television Information Office;

PROFESSIONAL GROUP

American Medical Association; American Bar Association; Rutgers University; University of Washington; Breakthrough Foundation; Parent Resources Institute for Drug Education (PRIDE); National Center for Neighborhood Enterprise; National Urban League; Alcoholism Council of Greater New York; National District Attorneys Association; Pacific Institute for Research & Evaluation; ACTION-Foster Grandparent Program; and the University of Chicago.

American Health Foundation; Milwaukee Psychiatric Hospital; J-M Foundation; International Association of Chiefs of Police; Stanislaus County Department of Mental Health-California; American Academy of Pediatrics; Therapeutic Communities of America; National League of Cities; U.S. Conference of Mayors; National Center for State Courts; and the National Association of Counties.

Council of State Governments; National Governors' Association; Washington Legal Foundation; Addiction Research and Treatment Corporation; National Black Alcoholism Council; Rap, Inc.; National Recreation and Park Association; Kingsley Association; Cities in Schools; Roberts, Fitzmahon and Associates; Narcotics Service Council (NASCO); Pennsylvania State University; and Rutgers University.

Virginia Commonwealth University; National School Safety Center; National Association of State Boards of Education; National Collaboration for Youth; National Education Association; National Executive Service Corps; Military Family Support Center; U.S. Chamber of Commerce; United Planning Organization; Americans for Substance Abuse Prevention; Morris and Company; Alcohol Information Media Studies (A.I.M.S.) Foundation; National Association of Halfway House Alcoholism Programs of North America; and the National Association of State Alcohol and Drug Abuse Directors.

GOVERNMENT GROUP

National Association on Drug Abuse Problems; National Conference of State Legislatures; National Association of Alcoholism and Drug Abuse Counselors; National

Association of Alcoholism Treatment Programs; New Jersey Division of Alcohol; National Institute on Drug Abuse; National Institute on Alcohol Abuse and Alcoholism; National Highway Traffic Safety Administration; Lucas County Court of Common Pleas—Toledo, OH; Massachusetts Department of Public Safety; Bureau of Alcohol, Tobacco & Firearms; Federal Trade Commission; and the U.S. Department of Education.

Family and Youth Services Bureau—Administration for Children, Youth, and Families; National Institute of Justice; U.S. Customs Service; Alcohol, Drug Abuse, and Mental Health Administration; White House Drug Abuse Policy Office; Bureau of Indian Affairs; Department of Housing and Urban Development; Department of Labor; Kentucky Cabinet for Human Resources; Allegan, Muskegon, Ottowa Substance Abuse Agency—Michigan; House Subcommittee on Telecommunications, Consumer Protection, and Finance; and the Office of Congressional Affairs.

U.S. Department of Justice—Drug Enforcement Administration; Navy Substance Abuse Prevention Program; New York State Division of Alcoholism and Alcohol Abuse; Council of State Governments; National Institute of Education; New York State Division of Substance Abuse Services; Bureau of Drug Abuse Services—California; South Carolina Commission on Alcohol and Drug Abuse; Illinois Department of Alcoholism and Substance Abuse; and the U.S. Department of Defense.

U.S. Army Drug and Alcohol Technical Activity; U.S. Navy Substance Abuse Division; United States Attorney—District of Massachusetts; U.S. Air Force; New Jersey Governor's Commission on Children's Services Planning; South Carolina Commission on Alcohol; Federal Task Force for the Homeless; Massachusetts Committee on Criminal Justice; National Clearinghouse for Alcohol Information; and State Representative Earl F. Tilly—Washington.

Mrs. BOGGS. We will turn now to the questioning.

Mr. Coats.

Mr. COATS. Thank you.

Mr. Mosher, you mentioned the excise tax and the relationship between price and consumption. Realistically, are we going to be able to affect the demand and the consumption of alcohol by the imposition of a higher excise tax? I guess the question is * * * to what point do we have to go to affect consumption, and is that point so excessive and so unrealistic, perhaps politically, or for whatever reason, that it will not be approved? Is it possible that the amount with a realistic chance of being approved is really not going to make a difference.

And we did just, I think in the last Congress, increase the tax. I am not sure there has been a direct correlation between the increase in the tax and a decrease in consumption.

Mr. MOSHER. Congressman, the tax hasn't gone into effect yet. I think we will find there is going to be an impact, although only on distilled spirits, which has already the highest level of taxation. And in fact, beer is the beverage of choice among young people, and I think that is the one we really should be taking a close look at.

There is, in fact, quite a bit of research both in this country and in other countries on the effect of excise taxes. For instance, Philip Cook, an economist at Duke University, did a study commissioned by the National Academy of Sciences and one commission led by the American Assembly, and found that a relatively small increase of taxes just on distilled spirits—25 cents, in fact, per gallon—had a substantial impact on heavy drinking, cirrhosis, and on drunk driving. Yet the tax itself was not substantial.

There are two points I want to make—and we do have very good research on this issue. First, teenagers are particularly price sensitive, and therefore it is a policy that really can be used to target young people. Second, price, even by the industry's own estimation, is one of the key variables in demand; and it is one that has been going down consistently over the last 30 years.

Now, we don't want to raise the tax to the point that we start creating a good market for bootlegging, but we do want to keep it at a realistic rate that reflects the costs that it creates to society, and also puts it in the marketplace at a substantially higher price than other beverages.

It is the trend since 1951 that I am really concerned about. Beer was substantially more expensive than soft drinks at that time. Now, when you go into the supermarket, you can buy beer at prices less than Coca-Cola. This is a very important part of the marketing strategy in what the industry calls the beverage market. These various beverages are now in competition with each other, and price is a very important variable in that competition.

Mr. COATS. I wonder if you would comment on what you see the response and the responsibility of broadcasters is in terms of alcohol and alcohol consumption. Where do you think all this should fall out, and where should we go with that?

Mr. MOSHER. Our Institute is conducting a study—in fact, the study directors of the study have been working on it over 10 years. A Warren Breed, one of our study directors, is particularly important in this—looking at the content of the media in terms of alcohol portrayals, not just in the advertising, but also in the programming. And what he has found is that it is portrayed very unrealistically by and large, particularly in prime time television.

Mr. COATS. In the programming, or in the——

Mr. MOSHER. In the programming. And what I mean by that is that people drink a whole lot and they don't show effects. It usually is a way of transition from place to place. It is used much more often than in real life.

Mr. COATS. Excuse me.

Mr. MOSHER. Yes.

Mr. COATS. I was under the impression that there was a ban on consumption in programming.

Mr. MOSHER. No, that is just on advertising. In advertising you can't actually show someone drinking. But the BATF rule does not affect the actual programming, just the advertising.

Mr. COATS. OK. Is there not a voluntary code that the industry follows?

Mr. MOSHER. Not on the programming. In fact, you can consume alcohol in the programming. I believe you are thinking of the voluntary ban on the advertising.

But anyway, let me go ahead and maybe some of the other witnesses can clarify that.

Mr. COATS. OK.

Mr. MOSHER. There have been some changes recently. Broadcasters have been more interested in the kind of research we do.

What Warren Breed did was take his research to producers, writers, members of the caucus—I believe they are going to be speaking here today—and said, "Look, why don't you use us as a resource in order to portray alcohol in a realistic way and in a way that will actually enhance public health goals and will be dramatically successful." And recently there have been some changes by the broadcasters in this area, and certainly more interest. We are now doing a study. We don't have the results yet, but I think we may find, some changes in what was really quite an alarming set of research findings.

Now, I think the reason why we are getting movement is because of all the pressure on the advertising. And I, personally, believe that when we have $800 million of advertising on television it is very, very difficult for some of the positive messages that we are trying to get across to really have much of an impact. The advertising—and we have had repeated content analyses of these advertisings—is deceptive, and not realistic, and is providing only positive messages about alcohol I think there have to be some major changes regarding advertising.

Project Smart, which the Council on Alcohol Policy is a member of, is seeking equal time on television for health messages. I would hope that this committee would recommend that kind of change in the advertising practices in the industry. I would hope that could happen voluntarily, but I think it may take some action by Congress.

When we talk about alcohol advertising, we are talking about the major antihealth information source in this country. According to a recent industry study, over $2 billion is being spent on marketing alcoholic beverages that is used in coordination with price and product availability strategies in what is called total marketing. It is a key element in making alcohol an ordinary beverage.

Mr. COATS. Well, I have a lot more questions, Madam Chairman, but I think I will pick that up in some of the next rounds here. There are a lot of members, I think some of these subjects will be addressed by subsequent panels.

Thank you.

Mrs. BOGGS. Thank you so much.

We have been joined by Mr. McKernan of Maine, who will question you now. He is a member of the prevention strategy task force.

Mr. MCKERNAN. Thank you, Madam Chair. I would like to follow up on Mr. Coats' questions because, as I am sure you are aware, there has at least been some discussion, if not much movement, on the issue of whether beer and wine advertising ought to be banned, whether or not that would serve any useful purpose, whether or not it goes too far, and whether there is some intermediary step that could be taken.

Would either of you have done any studies on what you think the impact of that would be, or do you have any general opinions on that?

Mr. MOSHER. The studies are limited. There is a study commissioned by the BATF—the Bureau of Alcohol, Tobacco and Firearms—in conjunction with the FCC and NIAA, done in Michigan State, that shows substantial impact, done by Atkin and Block. The impact was found particularly on young people. There have been a number of studies done on the content of advertising. The Atkin and Block study is a correlational study, which means that it was not done over a time period so that the cause/effect issue is very difficult to unravel.

I think the point to be made here is that studying the actual impact of advertising is very, very difficult because of all the other influences on drinking, because of the nature of all the intermediary things that can impact on drinking practices. I have no doubt in my own mind that advertising has a substantial impact on the norms and practices of drinking in this country. That is exactly what advertisments are designed for. What those impacts are are very difficult to determine. I think the industry probably has a much better idea than those of us outside the industry.

I can tell you that the content of advertising has been studied very carefully and that it is very deceptive in terms of the types of messages it puts out, particularly around alcohol's health impact. There are virtually no health messages in these advertisings. Public service messages are very, very limited and constitute less than 5 percent of the entire budget.

So, the studies primarily are on content. There are some studies on impact. There have been some studies overseas. Mostly these are correlational. So, I hesitate to say that we have definitive studies on the actual impact.

I want to make two other points. First the industry often tries to define the issue as what is the impact of this one ad on your drinking practices? If you watch this ad, does it make you go out and drink beer instead of something else, or whatever? That is not how advertising works. Advertising is coordinated with the other marketing efforts by the industry. It reinforces the pricing strategies and the availability strategies where you buy it. Availability is a very key part of this market: making it available in grocery stores, gas stations and other places where people are likely to buy. Advertising is keyed to availability variables and to the pricing variables in order to create a targeting of particular groups.

This is standard marketing practices. It is just that when you are marketing a drug it has a particularly adverse health impact.

Mr. **Regnery**. Let me just comment briefly on that if I could. Neither do we have any very good studies, and I suspect that, as Mr. Mosher says it is probably a virtually impossible thing to measure. I don't think there is any question that advertising is a very small part of the whole picture in terms of alcohol use. On the other hand, I don't think there is any question, either, that everything that is portrayed on television has an impact on society.

I would simply point out that in the Soviet Union, where they have a more serious alcoholism problem than we do, the last I heard the distillers were not advertising on television.

We have been very careful not to take a position on that issue in our partnership effort. One of the reasons for that is because we want both sides involved; and, in fact, we do have both sides in that question involved, both the distillers and the brewers and their trade associations, as well as those people who would advocate banning advertising altogether. We feel that by bringing both sides together in the partnership we can really have a more effective voice in the whole effort.

So, as I say, in terms of studies, no, we don't have any good ones, either.

Mr. **McKernan**. Let me ask one final question. On the issue of actions that States can and have taken in these areas, specifically whether or not some of the laws requiring jail sentences for drunk driving, and also some of the even more stringent requirements on young people if they are convicted of drunk driving charges, do those have any impact, and are those the types of activities that States ought to be pursuing?

Mr. REGNERY. Oh, to some extent they do. I would point out that my office is presently supporting an undertaking by the American Bar Association, or a group that has been pulled together by Mr. Shephard, the chairman of the American Bar Association, to examine exactly that question. They have had a series of hearings around the country looking at the State laws as they affect drug and alcohol abuse among teenagers. It is my understanding that that task force will be making a report to the entire Association in the summer meeting with recommendations that could have dramatic impact on those laws.

Mr. MOSHER. There have been some research studies on that, in fact. I would say the way to characterize the findings of the use of general deterrence as a prevention measure is that when the laws are put into effect there is an immediate impact which dissipates over time. In fact, it goes back close to the level that you would have anticipated without the laws. And the initial impact depends upon the amount of publicity—for instance, roadblocks can really help the impact of a change in more strict policies criminally because it really gets the message out there that there are these penalties and you will get caught.

But as the public begins to realize, or the drunk drivers begin to realize that this isn't really a very great likelihood that they are going to get caught, the impact tends to dissipate unless you impose a new measure that again brings it to the public's attention that we have these laws, and there is a new kind of downward trend.

Professor Ross of the University of New Mexico has done the most definitive studies. He has done it over several countries. There has been a number of other countries that show this same type of impact.

The point to be made is not that we shouldn't be imposing these laws, making them more consistent, making sure that when violators are caught, they are punished and are not bounced out through favoritism. We also need to increase enforcement. I think these are all important measures, but that only can be one aspect of the solution. What I see happening today, which I think is unfortunate, is that we impose a new criminal law and then we pretend the problem is solved. What needs to happen is for us to conduct an entire reexamination of alcohol in our society. This needs to include looking at these public policy measures. For example, we consistently ignore the role of the alcohol beverage control departments, the weakest department in virtually every State, which have tremendous potential power over the use and misuse of alcohol in our society.

Mr. MCKERNAN. Thank you.

Mr. REGNERY. Could I just add one thing? I think it is probably useful for purposes of that discussion to compare the drug laws and the alcohol laws. After all, drug use is illegal. And some States, perhaps, enforce the drug laws better than others, and some municipalities may. Nevertheless, every kind of illicit drug use is illegal everywhere in the United States. Nevertheless, there is a great deal of drug abuse in the United States. And I suppose that is the same argument that transcends the whole criminal justice system, that deterrence does have some effect but it is certainly not the only answer.

Mrs. **Boggs**. Thank you.

Mr. Wolf, welcome. Do you have any questions?

Mr. **Wolf**. No questions.

Mrs. **Boggs**. Mr. Anthony.

Mr. **Anthony**. I will pass, Madam Chairman.

Mrs. **Boggs**. Thank you very much.

Mr. Monson.

Mr. **Monson**. I just had a question on something that I have noticed happening. Some baseball parks have already implemented it, some are implementing it this year. They are using lower alcohol content beer in their sales.

How do you react to that as a possible compromise solution to this, not only for baseball stadiums, but for solving a much larger problem for the public as a whole?

Mr. **Mosher**. I am very excited about these changes in availability. I have termed it "server intervention." There has been quite a bit of research and program development in this area recently, both inside and outside the industry. Changes are being made regarding how alcohol is made available in places where it is sold. There is more attention to cutting people off who are intoxicated, taking action so that they don't get into a car. Some establishments are slowing down service when people look as if they may be getting into trouble. Many training packages for serving staff are being used today. Some establishments are beginning to reexamine their management policies. For example, some baseball parks are stopping service after the seventh inning or are instituting no drinking sections.

I think all of this is going to help change some of our norms, practices and attitudes regarding alcohol. There is a latent feeling in the country, and I think this was true for smoking 10 years ago, that heavy drinking is not appropriate, that it is unpleasant to take your family out to the ball game and have a bunch of drunks sitting around you. These changes are giving the folks that have these feelings a chance to express them, and I think that is very important.

I don't see the changes as a compromise. I think they constitute a very important aspect of the solution. I also think that the changes are being prompted by the liability issues involved. Establishments in most States may be sued if someone leaves the ball park, bar or restaurant while intoxicated. The patron's victim may be able to sue the server. This again shows the importance of public policy.

I would like to see the States get more active in promoting server intervention. I see it as a very important piece of the entire puzzle. I am very excited about it, and I think it shows that we are making an impact today on society.

Mr. **Monson**. Thank you.

Mrs. **Boggs**. Thank you very much.

Mr. Regnery, recently Elizabeth Shore, who was the former chairperson of HHS's Select Panel for the Promotion of Child Health, and who is now a Harvard lecturer, made a comment on the state of things for adolescents and young adults, 15 to 24 years of age. She cites evidence for the improvement in the life chances of many in that age group because of the differences made by deliberate and carefully designed social action. She notes:

> The overall death rate for 15 to 24 year olds, which stood at 106 per 100,000 in 1960, reached a high of 129 in 1969. It began falling fairly steadily during the 1970's and has dropped to 96 by 1983. The greatest single cause of mortality in this age group, motor vehicle accidents, peaked in 1969 and again in 1979. It has now dropped below the 1960 rate.

She goes on to impress on us again that many young people in disadvantaged circumstances still face desperate conditions and that the picture for them, unfortunately, is growing worse, not better. And in the light of evidence and wisdom that carefully designed interventions, especially prevention efforts, can and do make a difference, would you tell the committee about some of the programs of your office and the impacts they have had in preventing alcohol abuse?

Mr. REGNERY. Yes. Primarily what we have done in the prevention area, as I said initially, rather than start new programs, is to try to coordinate those that already exist and try to improve them if we can. We have provided funds to different Government agencies, for example, that have programs. We felt that, as we looked across the horizon, that there really were sufficient programs. New ones weren't needed. But we felt that those that existed might need some additional help, some funds, and so forth.

We have cooperated, for example, with the National Federation of Parents for Drug Free Youth, which has been very active in schools, and so on, urging teenagers in a variety of ways to abstain from alcohol and drug use. I think it has been extremely effective. The Mothers Against Drunk Driving movement I think stands out as a shining light in the whole area of citizen participation. I think that that organization and the other organizations that surround it probably had more impact on the statistics that you cited than probably any other factor. And as we know, they also have had dramatic impact on the State legislatures. This is a relatively new effort which has caught on in virtually every community in the United States.

We have cooperated, also, with the Drug Enforcement Administration, as I mentioned earlier, in their campaign using athletes, particularly in the lower schools, in the grade schools. The campaign uses high school athletes to go into the grade schools and to tell the kids, the younger children, about drug and alcohol abuse.

Let me just comment on one of the things that you mentioned. I think that many of the things, unfortunately, that we have done do affect the middle-class, if you will, much more readily than they do the under-class and the poor. And I think that many of the efforts, particularly prevention efforts, that we have devised and others have devised are aimed at our kids, rather than at these other kids. I think that is unfortunate because many of the things that I see on the media, and so on, I think are probably things that are not understood by those children who come from disadvantaged surroundings. And I think that we do need to make an effort to try to provide the sorts of things that they can understand and that have some kind of an impact on them. Because if you look at the numbers in those communities, and they are really much more perverse than they are in the middle-class community, if you will.

Mrs. **Boggs**. I am very happy to hear your comments on that. And, of course, we applaud your efforts to integrate the various programs that are already in existence. We hope, in this committee, to be able to show the success stories around the country and to replicate their successes in adapted circumstances to each local community and each group of persons, particularly young persons.

But in addition to bringing together all the successful organizations and promoting their efforts, have you ever sought any appropriations for the Office of Juvenile Justice and Delinquency Prevention which administers all the parts of the Juvenile Justice and Delinquency Prevention Act.

Mr. **Regnery**. I am sorry. I don't understand your question.

Mrs. **Boggs**. Have you ever sought any appropriations for the Office of Juvenile Justice and Delinquency Prevention which administers all the parts of the Juvenile Justice and Delinquency Prevention Act?

Mr. **Regnery**. No, we haven't, Mrs. Boggs. As you may know, the administration has asked for no funding for the Office of Juvenile Justice each fiscal year since 1982, and the Appropriations Committees have appropriated money at the rate of about $70 million to my office anyway each year.

Mrs. **Boggs**. Thank you very much, Mr. Administrator.

Mr. Mosher, do you know of any other Western nations that have adopted the policy recommendations you make in your testimony? Have they had any results?

Mr. **Mosher**. Yes. I guess the best example would be Finland. In 1969 in Finland the Finnish Government decided to attempt to change the drinking practices of their country through availability measures. Finnish drinking consists primarily of heavy drinking of distilled spirits on a binge basis, meaning maybe drinking perhaps once a week but in very heavy amounts at that time. The Government decided to increase substantially the availability of beer and wine hoping to adopt the southern European style of drinking, which would be more moderate drinking on more occasions but with less heavy drinking.

And what they found in some very careful research was that just the opposite happened; in fact, the heavy drinking continued, and the wine and beer was added onto the very heavy drinking of distilled spirits. Various problem indicators also increased.

This study is kind of a reverse of the study of limiting availability, but it shows that increasing availability will have a marked increase in consumption. And I would say the studies done in Finland are very, very good. They have been replicated in a number of countries in terms of the additional availability.

We don't have good data on what happens when you restrict availability on a long term basis because that is not current policy. Another difficulty is the lack of research funding, especially for this country. NIAAA has a very limited budget; it needs to be increased substantially. Several organizations have recommended increased funding including the Institute of Medicine, American Assembly, and the National Academy of Sciences. Despite these recommendations we continue to have very limited funding, particularly in the prevention and policy area. It is very difficult research to do. It will take a commitment before we can get really good research on that question.

There is definitely a relationship between availability and consumption as I stated earlier. Short term studies have been conducted, such as during beer strikes in the Scandinavian countries. Rates of admissions to treatment centers, arrests for drunkenness, drunk driving rates and other health indicators all went down during the time of decreased availability.

In the advertising areas, many countries do not permit advertising at all. Sweden, for instance, has never had advertising on television. And following the removal of advertising from the print media in that country, consumption went down quite substantially. Now, again we don't have good cause and effect. Other things were going on during that time.

Mrs. BOGGS. Thank you very much, Mr. Mosher.

We are very, very pleased that you have joined us this morning, and we thank you enormously for your input into the area that we are so concerned about. We hope that you will stay with us and be able to participate and listen to the other panels. I am very grateful to you both. Thank you so much.

Mr. MOSHER. Thank you very much. I appreciate the opportunity.

Mr. REGNERY. Thank you very much.

Mrs. BOGGS. We would like to call now to the witness table Tim Reid, who is an actor and board director of the Entertainment Industries Council of McLean, VA—again, we are very pleased that you came all the way across the country to be with us this morning—and Dr. Michael F. Jacobson, who is the executive director of the Center for Science in the Public Interest of Washington, DC.; Augustus Hewlett, who is the president of the Alcohol Policy Council of Waterford, VA, representing the National Association of Broadcasters; John B. Burcham, Jr., who is the chairman of the Licensed Beverage Information Council of Washington, DC.

We are sorry about your crowded conditions. But we very much appreciate your being here, and we will start, please, with the testimony of Mr. Reid.

You have all submitted written testimony, and if you would summarize your testimony, and proceed as you wish.

STATEMENT OF TIM REID, ACTOR, AND BOARD DIRECTOR, ENTERTAINMENT INDUSTRIES COUNCIL, McLEAN, VA

Mr. REID. Madam Chairman, members of the committee, thank you for the opportunity to be here today to discuss alcohol abuse prevention in the American family. Of course I will paraphrase my written statement.

I am here today for two reasons. First, and the most important to me, I am a parent of two teenagers whom I love very dearly, and I feel that it is my duty as a parent to do everything in my power to help bring an end to substance abuse among young people.

I have been a part of the fight against alcohol and drug abuse since 1969, and this was long before it was accepted as a problem that affected all people regardless of race, creed, occupation, political affiliation, or economic barriers.

The other reason I am here is to represent the Entertainment Industries Council, Inc., which is a national nonprofit organization whose purpose is to bring the power and influence of the entertainment industry to the forefront of the national effort to combat and deglamorize drugs, especially as it relates to the use of drugs and alcohol abuse among young people. I am on the board of directors of this organization, and I am joined today by my president, Mr. Brian Dyak. Mr. Dyak has been instrumental in developing our council's substance abuse deglamorization programs.

My testimony today will concentrate specifically on the work of the Entertainment Industries Council and their activities. In less than 1 year since the council was formed, we have developed partnerships with other entertainment industry-based organizations concerned with the prevention of alcohol use by minors and misuse by adults. One such organization is the Caucus for Producers, Writers and Directors. Larry Stewart, a board member of our council, is chairman of the caucus. And I have brought a short video tape here which would, of course, explain the purpose I guess of the caucus. And if we could run that.

[Video tape presentation.]

Mrs. Boggs. Thank you very much, Mr. Reid.

Mr. Reid. The caucus is currently working on a second white paper to be distributed to the moviemaker.

On the subject of motion pictures, the Entertainment Industries Council is very concerned about the excessive misuse and abuse of alcohol and drugs in movies that are made for the youth market. Recently our board of directors passed a resolution to establish a subcategory rating of SA for substance abuse. This would apply to feature films that glamorize drugs or alcohol use. The SA subcategory rating would be a special advisory to parents as to the film's content as it relates to the depiction of drugs and/or alcohol.

For the sake of time, of course, I will have you refer to the written testimony as to the specifics of the resolution. Our resolution has been presented to Jack Valenti, president of the Motion Pictures Association of America, and Mr. Dyak has suggested to Mr. Valenti that the ratings administration consider the SA subrating for a 36-month period of time. And the subrating would be evaluated and, if it is meaningful and accepted by parents during this time, then we would retain the rating. If the parents do not find it valuable, then the rating should be terminated. The success of the rating, therefore, rests with those for which it is intended, the parents.

Many participants here are concerned about the alcohol beverage advertising, and so are we. In fact, last September our board of directors passed a resolution directed to the alcohol beverage advertising issue, and our resolution states: "Alcohol beverage advertising should not be overglamorized to those people who are not of legal drinking age." We believe that just as the creative community of television has begun to deglamorize alcohol use, the ad agency creative people can modify commercials.

As recently as February, the Entertainment Industries Council presented eight alcoholic beverage administrative advertising guidelines to the American Bar Association Commission on Alcohol and Drug Abuse. These guidelines are included, of course, in my written testimony, and were developed to complement the guidelines and standards adopted by other media groups. NBC, CBS, and ABC have all been active in efforts to combat the alcohol problem in our society. As you may noticed, each network has been airing a series of antidrunk driving public service spots for the viewers.

In conclusion, Hollywood is a newcomer to the Nation's war on substance abuse and many of us have accepted a responsibility to do what we can. The opportunity to be here today is appreciated by the board of directors of the Entertainment Industries Council, and we look forward to working with members of this committee to further enhance both of our efforts.

Thank you.

Mrs. Boggs. Thank you so much, Mr. Reid, and we will get back to you for questioning if you can spare the time to stay with us, which I hope you can.

[Prepared statement of Tim Reid follows:]

Prepared Statement of Tim Reid, for Entertainment Industries Council, Inc.

Mr. Chairman and Members of the Committee: Thank you for the opportunity to be here today to discuss alcohol abuse prevention in the American family. I am representing the Entertainment Industries Council, Inc., a national nonprofit organization whose purpose is to bring the power and influence of the entertainment industry to the forefront of the national effort to combat and deglamorize drug use and alcohol misuse in society, especially among youth. I am a board director of this organization and am joined today by our president, Brian Dyak. Mr. Dyak has been instrumental in developing our council's substance abuse deglamorization programs.

My testimony will concentrate specifically on the work of Entertainment Industries Council activities which address alcohol prevention in the American family. The council has developed partnerships with entertainment industry based organizations concerned with the prevention of alcohol use by minors, and misuse by adults. Our relationships with the Caucus for Producers, Writers, and Directors; the Council for Families and Television; all three television networks; and the Motion Picture Association of America has strengthened our organization's efforts to establish a viable program that brings to bear the power and influence of the entertainment industry on alcohol abuse prevention. The strength of our effort rests on: a spirit of cooperation between network and studio executives, publicists, agents, producers, directors, writers and celebrities. It is through this cooperation that we can influence over 70 million television viewers, and theater goers by the millions.

A major contribution to the prevention of alcohol abuse in the American family is attributed to the fine work of the Caucus for Producers, Writers, and Directors. Larry Stewart, a board director of the Entertainment Industries Council, is chairman of the Caucus Committee on Drug and Alcohol Abuse.

Mr. Stewart recently testified before the Senate Permanent Subcommittee on Investigations. He stated, "The Caucus is not a guild, it is not a union, it is not a lobbying group; it is an organization of some 175 individuals, many of whom are entrepreneurs who are responsible for what the American public views on television every night. The caucus was formed for the purpose of assuming a more direct responsibility to the American viewing public in television programming and related fields." I have brought with me a short video tape to better explain the work of the caucus. (Play Tape).

At a recent meeting of the caucus, the subject of excessive misuse and abuse of alcohol and drugs in theatrical motion pictures was discussed. Films that targeted the youth market were particularly addressed. The members of the committee felt that the caucus ought to develop a concept which could offer an incentive for film producers to significantly cut back, or hopefully, completely eliminate scenes which depict the glamorization of drugs or alcohol. The members of the committee felt that the same principles used in television could apply to film. The caucus is currently working on a second White Paper to be distributed to movie makers.

The film industry is world wide and has a varied group of producers, writers, and directors. The days of the studio mogul, who can simply issue an edict, are over. Most movies are made by independent production companies. The movie industry does not have the tight parameters of activity common to the television industry.

While motion picture production companies can be here today and gone tomorrow, the Motion Picture Association of America, the National Association of Theater Owners, and the International Film Importers and Distributors can aid our efforts through the Classifications and Ratings Administration. Recently, the Entertainment Industry Council's board of directors passed a resolution to establish a subcatergory rating of "S.A." for "substance abuse," that would apply to feature films that glamorize drug or alcohol use. The "SA" subcategory rating would be a special advisory to parents as to specific film content as it is related to the depiction of drugs or alcohol. I would like to read a section of our resolution and ask for your support of our position.

Our resolution has been presented to Mr. Jack Valenti, president of the Motion Picture Association of America, who is now considering the "SA" subrating as an advisory to parents for a 36-month period of time. The subrating would be evaluated, if it is meaningful and accepted by the parents, then retain the rating: If the parents do not find it valuable, then the rating should be terminated. Success of the rating, therefore, rests with those for whom is intended, parents.

Mr. Valenti recently stated: "We have only a few months ago made a major revision in the rating system which is just now beginning to take effect. We are studying it carefully to see if the benefits claimed for it are real, and precisely how the public is responding. You may be sure that the Motion Picture Association will study, most carefully, the suggestions you have made."

The entertainment industry needs to assume responsibility as a resource for the prevention of alcohol abuse in the American family. Many participants here are concerned about alcohol beverage advertising, so are we.

Last September we resolved that: "Alcohol beverage advertising should not be over glamorized to those people who are not of legal drinking age." We believe that just as the creative community of television has undertaken to deglamorize alcohol use in television, the ad agency creative people can modify commercials.

As recently as February, the Entertainment Industries Council presented eight alcohol beverage advertising guidelines to the American Bar Association Commission on Alcohol and Drug Abuse. These guidelines are included in my written testimony and were developed to compliment the guidelines and standards adopted by other media groups. NBC, CBS, and ABC have all been active in efforts to combat the alcohol problem in society.

In conclusion, the entertainment industry is a newcomer to our nation's war on substance abuse. We have accepted a responsibility to do what we can.

The National Council for Families and Television President, Nicholas Van Dyck has spearheaded an effort to host a mid-June invitational conference to better inform producers, writers, directors and network program executives about substance abuse. Many in the entertainment industry are joining national efforts to combat and deglamorize drug and alcohol abuse.

This conference is an opportunity for prime time production teams, studio and network executives to discuss the problems of substance abuse, and the related concerns of the viewing public. It is our hope that a wide variety of story ideas will be developed which will be incorporated in next year's television season.

The opportunity to be here is appreciated by the board of directors of the Entertainment Industries Council, Inc. We look forward to working with Members of this committee to further enhance both of our efforts.

RESOLUTION

Whereas, the movie industry has the capability to advise the public, especially parents, that substance abuse is depicted in movies without negative consequences; and

Whereas, many youth oriented feature films depict drug or alcohol use as glamorous, humorous, and without negative result; and

Whereas, drug use and alcohol abuse have become a national problem of epidemic proportion; and

Whereas, non-prescription drug use and alcohol use by minors is illegal; and

Whereas, depiction of an illegal age without negative consequences should be given equal consideration in rating movies as: theme, language, nudity, sex and violence; and

Whereas, the Voluntary Movie Rating System should include depiction of drug or alcohol use without negative consequences in the current rating process; and

Whereas, the Classifications of Ratings Administration, Motion Picture Association of America, National Association of Theater Owners, and International Film Importers and Distributors of America should recognize the important contribution that can be made in behalf of society by adoption of a special movies rating subcategory that advises the public as to the depiction of substance abuse without negative consequences; and

Whereas, such action is in the best interest of parents, children, and the entertainment industry; and

Whereas, adoption of a rating sub-category of SA for substance abuse would be a definitive statement by the movie industry that acknowledges a partnership in our nation's war on drugs:

Therefore, be it resolved that the Board of Directors of the Entertainment Industries Council, Incorporated, hereby endorse the inclusion of specific criteria in the movies rating review process which takes into consideration the depiction of substance abuse without negative consequences, and whereby, the Entertainment Industries Council, Incorporated further recommends the adoption of an *SA* (Substance Abuse) sub-category rating that does apply to the existing rating categories.

ALCOHOL BEVERAGE ADVERTISING GUIDELINES, ENTERTAINMENT INDUSTRIES COUNCIL, INC.

1. Avoid the implication that heavy use of alcohol is the ultimate goal: The appeal should imply that alcohol is part of, not the reason for, a pleasant occasion.
2. The central focus of an advertisement should not be that alcohol use will result in sophistication, manliness, sexual appeal, glamour, virility or adult status.
3. Alcohol use should be portrayed in pleasant, relaxed and friendly circumstances . . . preferably as an adjunct to social settings, and used in combination with food.
4. If the scene is large enough, some persons should be depicted as abstaining. Those who are shown as abstainers should not be depicted as troubled, social outcasts, "wallflowers", or odd.
5. An advertisement should not show alcohol use in, or as a result of stressful, angry, lonely, boring, or unhappy circumstances. Alcohol should not be portrayed as a problem-solver.
6. Those involved in alcohol advertising should be sensitive to the environment of the advertisement, regarding its potential effect on youth. Selection of time and location for advertisements should insure that the principal audience will be a mature one.
7. Convey a spirit of moderation and responsibility in the use of alcohol, and the life style of the persons who drink alcohol.
8. Do not portray alcoholism, alcohol abuse, or drunkenness to be humorous.

Mrs. Boggs. We would like to acknowlege now that Congressman Swift is here, and he has a video presentation that he would like to present at this time.

Welcome, Al.

STATEMENT OF HON. AL SWIFT, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF WASHINGTON

Mr. Swift. We, in Washington State, are extremely fortunate to have a couple of stations who have a 40-year history of particularly exceptional public service. Knowing what this committee was examining with regards to the problem of alcoholism and its effect on families and on children, I thought a series that one of those stations in Seattle did this past year might be particularly helpful to you, as a demonstration of what television can do.

KOMO television, which is an ABC affiliate in Seattle, did not do just a program or a series of public service announcements, but, in fact, created a campaign to increase the awareness among its viewers on what these problems were and some of the things that they could do about them.

The presentation that I would like to offer runs only 8 minutes. It is not a condensation of a program, it is a condensation of a campaign. You will see not only public service anouncements that were prepared to deal with this issue. You will see special programs that were produced specifically for the campaign. You will see other programs that are ongoing series that devoted special attention to this issue, such as one called "Town Meeting," which is a weekly program, an audience participation program which devoted some of its efforts to this issue, and so forth.

And I think if you use your imagination and spread this campaign over months, instead of the 8 minutes that it takes, you will get some kind of an impression of what television can do and has been doing voluntarily in many markets in this country to try and address the issue that you are particularly concerned with. And I think you can also get a feeling for what they can do to help solve the problems that you are concerned with.

I would make one final point. This campaign, not only by KOMO, but other broadcasters in Washington State, resulted, at least I think they can take part of the credit for the fact that during that high period of traffic fatalities between Christmas and New Year's this past year resulted in no fatalities in Washington State at all.

With that, I commend this tape to your attention.

Mrs. Boggs. Thank you much.

May we now have the video presentation?

[Video tape presentation.]

Mrs. Boggs. We are very grateful to Congressman Swift and to the station, and to all the people who participated in this presentation.

We will hear now from Dr. Michael F. Jacobson, the executive director for the Center for Science in the Public Interest in Washington, DC.

STATEMENT OF MICHAEL F. JACOBSON, PH.D., EXECUTIVE DIRECTOR, CENTER FOR SCIENCE IN THE PUBLIC INTEREST, WASHINGTON, DC

Mr. Jacobson. Thank you very much, Chairwoman Boggs.

We are very grateful that this committee is exploring the dimensions of alcohol problems and the various ways of preventing those problems. Our organization, Center for Science in the Public Interest, is a nonprofit group supported by about 35,000 members throughout the country. Much of our work involves studying the promotion of alcohol and advocating measures to reduce alcohol problems.

In order to better illustrate several of my points, I would like to begin my testimony by posing as Joe College, a typical American student. As you see, my clothing is provided by Busch Beer, Budweiser gave me the shirt, pins from Miller and from Bud.

Outside my dormitory room we have a few lovely posters that I managed to scrape off the walls and bring down here. [Show posters.] There is another poster that I actually grabbed off the University of Maryland bulletin board that says, "After a hard day's work pour yourself some schnapps." Not one, two, or even three glasses, but four glasses, because it must be a hard day's studying. [Referring to poster.]

Our school basketball team has a calendar sponsored by Busch, and when I go to the game I let them know who I am rooting for—not just the Hoyas, but Bud Light. [Show hat and banner.]

When I turn on the radio—let me see what is on.

[Audio.]

Why don't we see what is on television?

[Video.]

I think that is enough of the television. I want to read my school newspaper, but look what drops out. [Show poster.] A wonderful poster that I can hang on my wall for Miller's king can, a 32-ounce can of Miller beer. I can get tanked on just one can of beer now, a wonderful service from Miller. Plus in the school newspaper there are all kinds of ads: "Great writing starts with a little beer." [Show poster.] Beer is the No. 1 national advertiser in alcoholic beverages in college newspapers.

My next door neighbor in my dormitory is a campus marketing representative for a liquor company. It is his job to try to get our dormitory to use his brand of liquor when we have parties.

Sometimes I go to the movies. And what do I see in the movies but alcoholic beverage brand names that are intentionally placed there where the company, regardless of who it is, pays a middleman to get that brand in the movie. It is a very subliminal type of advertising.

This is just the tip of the iceberg. Alcohol producers spend about $2 billion a year promoting their product, and much of it to immerse students in prodrinking messages from morning until night. It is no exaggeration to say that students are being indoctrinated into a lifestyle in which alcohol is the essential and central prop.

Even some candid industry executives have acknowledged problems. William Coors, president of Coors Brewing, criticized brewers for their outrageous lack of ethics in pushing beer on college campuses. Michael Mondavi, president of the Robert Mondavi Winery, recently called some brewers "immoral" for "pandering to youth." "Sex sells," he said, "but appealing that way to youth is improper."

The constant associations between drinking and friends, sex, health, and athletic achievement is cause enough for concern. What is worse is that the pressure to drink remains unbalanced by equally persuasive and frequent reminders that you don't have to drink to be happy and successful.

Young people in the United States have serious problems with alcohol. For the past decade, about 40 percent of high school seniors report engaging in binge drinking at least once every 2 weeks; 11 percent of junior and senior high school students surveyed in New York State claimed that they were "hooked" on alcohol. And sadly, there are some 3.3 million alcoholics and problem drinkers under the age of 18.

In the last couple of years, many individuals and groups have condemned the way alcohol is marketed. Cries from people like Representative Don Edwards for voluntary reforms have been unheeded; instead, companies serve up platitudes and token campaigns designed to get Congress off their back. Sometimes the actual campaigns are less vigorous than the PR hoopla announcing them. Anheuser-Busch, for instance, got national news coverage for its new TV spots endorsing vague notions of moderation. But how effective are these occasional spots in comparison to that company's $250 million a year worth of advertising campaigns? Not only are such moderation spots only 10 seconds long, but they only run at holiday times. Meanwhile, Anheuser-Busch is keeping the pressure on kids by creating USA Band, a new rock band that will be promoting beer. Also, Anheuser-Busch has just introduced King Cobra malt liquor, which is higher in alcohol than their other brands and is aimed at the black community.

Likewise, Seagram, which boasts about its long history of moderation ads, spends tens of millions of dollars a year to maximize consumption of its products. Seagram is currently advertising a new line of wine coolers, a product that is seen as a bridge from soft drinks to alcohol.

Opposition to broadcast ads is mounting. Already over 800,000 Americans have signed a petition calling for either a ban on alcohol advertising or equal time for health messages to bring up the other side of the story. In response broadcasters have aired an increased number of antidrunk driving spots, and we commend them. But these can be expected to disappear as soon as citizens groups such as Project Smart reduce their pressure. Just ask the antismoking people. As soon as broadcasters were no longer legally required to run countercommercials about cigarette smoking, they dropped those counter-commercials. So much for responsibility among broadcasters.

Occasional flurries of drinking-driving spots will have little long-term impact on alcohol problems. We need a comprehensive program that will stick with us year after year after year. First, all marketing efforts aimed at the two most vulnerable segments of the market, youths and heavy drinkers, should be ended. Next, health spots and other objective information should be required to balance the ads promoting alcohol. Barring such an equal time provision, the advertising should be halted.

It is worth noting that a recent Lou Harris poll found that 57 percent of those surveyed favored a total ban on alcohol broadcast advertising. I suspect that a much higher percentage would favor an equaltime provision. As part of a comprehensive education campaign, beverage labels should list both ingredients and calories. Furthermore, labels should include a warning notice advising consumers of the risks involved in drinking. The education campaign should heavily involve the broadcast media, but should also involve schools, newspapers, magazines, billboards, signs in liquor stores—a whole variety of approaches.

While the effects of advertising reforms and education would be gradual, an increase in excise taxes could have immediate impact. Federal excise taxes are at their lowest point since the repeal of prohibition, and those low taxes are reflected in relatively low prices for alcoholic beverages. As Mr. Mosher mentioned, in many areas beer and wine are as cheap, or even cheaper, than soft drinks.

Mrs. BOGGS. Dr. Jacobson, if you will excuse me, could you wrap up your testimony?

Mr. JACOBSON. I am nearly finished.

Mrs. BOGGS. Thank you.

Mr. JACOBSON. Congress should immediately raise the taxes, particularly on beer and wine, and use some of the money to help finance this kind of program.

An intervention program can work. Sweden is one nation that has mounted a serious Intervention Program with limitations on advertising, drunk driving programs, higher excise taxes. They have reduced per capita alcohol consumption by 21 percent between 1976 and 1983, and roughly the same or even greater decreases in drinking problems among young people. This Swedish trend is in sharp contrast to the American trend.

I know that this hearing will educate the public about alcohol problems. I hope, in addition, it will stimulate action toward the type of Comprehensive Program that would save millions of families from the agonies of alcoholism and alcohol abuse.

Thank you very much.

Mrs. BOGGS. Thank you so much, Dr. Jacobson.

[Prepared statement of Michael Jacobson follows:]

PREPARED STATEMENT OF MICHAEL F. JACOBSON, PH.D., EXECUTIVE DIRECTOR, CENTER FOR SCIENCE IN THE PUBLIC INTEREST, WASHINGTON, DC

Chairman Miller and Members of the Select Committee, we are grateful that this Committee is exploring the dimensions of alcohol problems and the various ways of preventing those problems. For the record, I am Michael Jacobson, executive director of Center for Science in the Public Interest, a nonprofit organization that studies the promotion of alcohol and advocates measures to reduce alcohol problems. In order to better illustrate several of my points, I would like to begin my testimony by posing as Joe College, a typical American student.

My clothing was provided by beer producers and distributors. For my dormitory room, Pabst and Miller have provided me with a few lovely posters. Outside my room is another poster suggesting that I drink four glasses of schnapps "after a hard day's work." The schedule of our school's basketball team is sponsored by Busch, and when I go to the games, I wave around a big foam finger advertising Bud Light. Also, Pabst provides calendars for intramural sports events on our campus. When I turn on the radio, I might hear a beer or wine commercial [Budweiser]. Flip on the television, and what do I see but more commercials like these [Coors Lite, Bud Lite, Wild Irish Rose, Schlitz malt liquor]. That wine commercial with the Michael Jackson look-alike is especially appealing to my kid brother who is still in junior high. Paging through my school newspaper, out drops a beautiful poster pushing Miller beer's new 32-ounce size King Kan. Now I can get tanked on just one beer! Reading the school paper, I can't miss all the ads telling me to drink this brand or that. [Sample ads in Appendix 1] My next door neighbor is a campus marketing representative for a major beer distributor; it's his job to try to get our dormitory to use his brand at our parties. When I have a few extra dollars, I might go see a movie, and what do I see but ads for alcoholic beverages intentionally placed right in the movie itself!

Alcohol producers spend over $2 billion a year promoting their products, and a good fraction of the money is being used to immerse students in pro-drinking messages from the time they awaken in the morning to the time they go to sleep at night. It is no exaggeration to say that the students are being indoctrinated into a life-tyle in which alcohol is the essential and central prop.

Industry officials have acknowledged both the importance and the shame of going after youths. One marketing executive has said: Let's not forget that getting a freshman to choose a certain brand of beer may mean that he will maintain his brand loyalty for the next 20 to 35 years. If he turns out to be a big drinker, the beer company has bought itself an annuity [ref.]. William Coors, president of Coors Brewing Company, as long ago as 1983, criticized brewers for their "outrageous" lack of ethics in aggressively promoting beer on college campuses. Michael Mondavi, president of the Robert Mondavi Winery, recently called brewers "immoral" for "pandering to youth." "Sex sells," he said, "but appealing that way to youth is improper."

Of course, college isn't students' initial exposure to admonitions to drink. They start watching television commercials, hearing radio commercials, and seeing billboards from the time they are four or five years old. Many of the television commercials include retired professional athletes, wine experts, and popular musicians, often along with upbeat, contemporary music. Many radio ads for beer feature popular rock, country, and soul singers and are almost industinguishable from the songs themselves, and some songs even publicize a brand of beer or liquor.

The constant associations between drinking and fun, friends, sex, attractiveness, health, and athletic achievement is cause enough for concern. What's worse is that the pressure to drink remains unbalanced by equally persuasive and frequent reminders that you don't have to drink to be happy and successful.

Even against this promotional backdrop, the current prevalence of abusive drinking among youths is astonishing. For the past decade, about 40 percent of high school seniors report engaging in binge drinking (five drinks or more at a single sitting) at least once every two weeks. Eleven percent of junior and senior high school students surveyed in New York State claimed they were "hooked" on alcohol. Children begin experimenting with alcohol even in grade school. Of tremendous concern are researchers' findings that indicate that kids who use alcohol before age 15 have three times the risk of developing alcohol problems than do youthful abstainers.

In the last couple of years, the PTA, National Council on Alcoholism, Remove Intoxicated Drivers, the Mormon and United Methodist churches, and other groups have condemned the way alcohol is being marketed. To neutralize these and other critics, some companies have begun sponsoring modest campaigns to promote "moderate" drinking. Though we welcome industry's acknowledgement of alcohol problems, the actual campaigns are sometimes less vigorous than the public relations hoopla announcing them. Anheuser-Busch, for instance, was given national coverage by the TV networks for its new TV spots endorsing vague notions of moderation. But how effective are such spots in comparison to that company's $250 million a year advertising campaigns? Not only are the moderation" spots just 10-seconds long, but they are run only at holiday times. Also, their message, "When it's party time, know when to say when," is hardly the kind to encourage kids to *avoid* drinking. Meanwhile, Anheuser-Busch is keeping its foot on the accelerator by creating USA Band, a new rock-and-roll group that will be promoting beer to rock and roll fans, including young people. That company has also just introduced King Cobra malt liquor, which is higher in alcohol than its other brands and aimed at the black community.

Likewise, Seagram, which boasts about its long history of "moderation" ads, spends tens of millions of dollars a year to maximize consumption of its products. For example, Seagram currently advertises a new line of wine coolers (lightly carbonated wines containing 6 percent alcohol). Wine coolers are seen as a product that can attract soda pop and beer drinkers to wine. As one industry executive said, coolers are a transition product that can "open all kinds of doors. . . . [Wine coolers] are exposing a lot of people to wine and alcoholic beverages." Seagram has also been seeking to run television ads to promote hard liquor, but these have been rejected by all three major networks.

In response to public pressure against broadcast alcohol ads, broadcasters have aired an increasing number of anti-drunk driving spots. But these can be expected to disappear as soon as citizens groups reduce their pressure on broadcasters and brewers. This is a lesson that the anti-smoking people learned well. As soon as broadcasters were no longer legally bound to run counter-commercials, they dropped them . . . and rarely is such a spot now seen.

Occasional newspaper ads and transient flurries of drinking-driving spots will have little effect on alcohol problems in the U.S. Instead, we need a comprehensive program to prevent, as well as treat, the wide range of alcohol-related problems. These range from school failure to homicide, from cancer of the mouth and throat to birth defects, from child abuse to drownings, from teen-age suicide to railroad crashes.

We offer the following recommendations as a guide to the type of anti-alcohol abuse program that would be both self-financing, and effective.

All marketing efforts aimed at the two most vulnerable segments of the alcohol market, youths and heavy drinkers, should be ended. Ads suggesting more than one drink, the college marketing representatives, the lifestyle commercials—these and other practices should all be prohibited.

Health spots, announcements supporting alternatives to alcohol, and other objective alcohol information should be required to balance the ads promoting alcohol. Special messages should be developed and aired to reach high-risk populations, such as pregnant women, children of alcoholics, and adolescents. Barring such an equal time provision for broadcast ads and warning notices within print ads, the advertising should be halted. How can parents and teachers compete in educating youths about alcohol in the face of two billion dollars worth of pervasive and memorable drinking promotions? Apparently, most Americans want at least a chance, because, according to a recent Lou Harris poll, 57 percent of Americans favored a total ban on broadcast beer and wine advertising. In all likelihood, even a greater percentage would support an equal time proposal.

While the effects of advertising reforms would be gradual, another measure, an increase in alcohol excise taxes, could have immediate impact. Federal excise taxes are at by far their lowest point since the repeal of Prohibition, and these low taxes are reflected in today's relative bargain prices for alcoholic beverages. In many localities, beer is as cheap as soft drinks, and wine is even cheaper!

Compared to the tax per unit of alcohol on distilled spirits, the levies on beer and wine are set at extremely low levels. The tax is approximately 3 cents for a can of beer or bottle of wine. Congress should immediately increase the taxes on beer and wine to equal the taxes imposed on liquor. Then, all taxes should be raised so as to undo the effects of inflation since 1951, the time of the last moderate increase. Higher taxes could both help reduce the federal deficit and trigger decreases in consumption, especially among young people. A portion of the revenues could be used to finance extensive alcohol education and treatment programs, as well as re-training programs to assist workers whose jobs may be affected by the reduced demand for alcoholic beverages. Despite the public's general opposition to tax increases, a 1981 public opinion poll taken by Associated Press found 55 percent of those surveyed in favor of higher alcohol taxes, and a 1982 Gallup poll reported that almost the same percentage favor doubling the tax on liquor.

As part of a comprehensive education campaign, beverage labels should provide a modicum of necessary information for consumers. Ingredients should be listed, calories per serving should be declared, and all labels should include a notice advising consumers of the risks involved in drinking. As with cigarettes, the warning notices might rotate between ones regarding alcohol's promotion of birth defects, cancer, various types of "accidents," and others.

The education campaign should heavily involve the broadcast media, but should also employ popular newspapers and magazines, billboards, signs in liquor stores, pamphlets enclosed with beverage packages, and the like. All levels of school (grammar school through medical school) should include curricula pertaining to alcohol risks. The campaign ought to inform people of drinking-related problems, provide information on where problem drinkers can go for assistance, offer role model support for adolescent abstinence, and target high-risk drinking practices.

Alcohol problems will never be abolished completely. But with a comprehensive campaign such as I have described, we can look forward to reductions in the neighborhood of 30-50 percent in alcohol-related problems over the next decade. Thousands of lives, thousands of families and careers, could be saved. The cumulative economic benefit of such a program would come to tens of billions of dollars. One indication that intervention programs can be effective comes from Sweden. That nation has implemented a major educational campaign, high taxes, an ad ban, and stiff drunk driving penalties. As a result, the Swedish government reports that:

Per capita alcohol consumption declined 21 percent between 1976 and 1983. [ref.]

The percentage of 9th grade boys and girls who acknowledge drinking once a month or more declined from 39 percent in 1979 to 25 percent in 1981. [ref.]

The percentage of 16-year-old boys who stated that they consumed the equivalent of half a bottle of liquor or more when they drank dropped from 40 percent during the 1970s to 28 percent in 1981. [ref.]

The number of people enrolled in public institutions for alcoholics declined from 2738 to 2400 between 1975 and 1981. [ref.]

This Swedish trend is in sharp contrast to U.S. data that indicate relatively stable, high levels of alcohol abuse among high school students and relatively stable levels of alcohol consumption for all Americans.

I know that this hearing will educate the public about alcohol problems and possible remedies. I hope, in addition, that the hearing will stimulate action toward the type of comprehensive program that would save millions of families from the agonies and devastation of alcoholism and alcohol abuse.

Mrs. BOGGS. Now, please, we will hear from Mr. Augustus Hewlett, who is the president of the Alcohol Policy Council of Waterford, VA, representing the National Association of Broadcasters.

STATEMENT OF AUGUSTUS H. HEWLETT, PRESIDENT, ALCOHOL POLICY COUNCIL, WATERFORD, VA, REPRESENTING THE NATIONAL ASSOCIATION OF BROADCASTERS

Mr. **Hewlett**. Thank you, Madam Chairman. I am very pleased to be here.

I have worked with and known for several months now the leadership of the National Association of Broadcasters. We were working together on the workshops that Mr. Regnery referred to earlier. Back in October we first started this. NAB asked me to testify in their place today because they felt it more appropriate for someone more familiar with the full complexity of the issues of alcohol abuse and alcoholism. I have over 25 years of experience in the field of alcoholism, 15 of which were spent as executive director of the Alcohol and Drug Problems Association of North America, during which time I was quite instrumental and involved heavily in all of the related public policy discussions at the Federal level, from 1964 through 1979.

Mr. Jacobson has attacked advertising—I assume as a primary factor——

Mr. **Jacobson**. Not the primary, but one of many factors.

Mr. **Hewlett** [continuing]. One of many factors with regard to contributing to alcohol problems. In my own experience in the field, I have seen Government agencies and private groups devote millions of dollars to the scientific investigation of alcohol abuse and its related social problems. The years of independent study document that alcohol abuse consumption patterns are tied to a complex set of sociological, psychological, and physiological factors, and compared to these influences media exposure is considered to be the weakest, or even nonexistent, influences on alcohol consumption.

Madam Chairman, you have copies of my testimony, and I would like to briefly summarize and even read some of it out of context and to embellish a little bit if I may.

Mrs. **Boggs**. You certainly may. You proceed as you wish.

Mr. **Hewlett**. Whereas many sound and positive activities have taken place on alcohol-related problems, including adolescent alcohol abuse, these problems deserve even more special, informed attention and well thought out, carefully constructed activities involving the broad range of nationwide educational systems. Included in this matrix are radio, television, and the print media; the family; churches and synagogues; the school systems; business, industry, and labor; the judiciary and law enforcement agencies; organized sports; organized youth groups and civic clubs; philanthropic foundations; student groups; appropriate public agencies at all levels of government, including elected officials; plus the relevant professional and academic disciplines.

If all segments of the Nation's educational systems cooperate on the dissemination of consistent, positive messages aimed to reduce these problems, the outlook for major accomplishment is, indeed, bright.

The goal for the year 2000 could well be the attainment of a healthy American atmosphere, one which will be conducive for those who can drink and who choose to drink to do so in moderation and without guilt or fear; for those choosing to abstain to enjoy the same degree of freedom; and for those who, for whatever reason, develop drinking problems to recognize those problems at the earliest possible stage and to seek appropriate help. Such an atmosphere, developed to its fullest potential, will inevitably result in the reduction of all alcohol-related problems to their minimal incidence.

We should also recognize that significant advancements toward the development of this ideal national atmosphere have been made over the past 25 or 30 years. Some outstanding examples are:

(1) The American people have come to accept the illness nature of alcoholism. This may be, by the way, the most important advancement that we have seen.

(2) It is no longer considered heroic by a growing number of younger drinkers to over-indulge. The "forbidden fruit" syndrome has been reduced. Concerted efforts to further reduce this mystique are called for.

Fortunately, early age alcohol abuse seems destined to decline in any event because of two phenomena: first, the age group 16 to 30 is declining as a percentage of the total population; second, in American history the smaller that age group is as a percentage of the total population, the more its individual members have conformed with social customs and reasonable laws.

Additionally, we are now witnessing a strengthened commitment to family throughout society; and this is, indeed, encouraging since the family unit is the most fundamental and important of the educational systems enumerated earlier. This fact gives even more reason to be optimistic about our potential to reduce alcohol abuse on a dramatic scale in the foreseeable future.

(3) To an increasing degree, no matter what age group is involved, it is no longer considered unsociable to choose nonalcoholic drinks at social functions.

(4) Drunkenness is no longer considered humorous by a large and growing number of Americans. The rewards reinforcing drunken behavior, therefore, have been greatly reduced.

(5) More American businesses are adding alcoholism as a coverable diagnosis in their group health insurance plans. As a result, alcoholism is fast becoming accepted in the mainstream health care delivery system. This is where it should be with the appropriate specialized medical, treatment, and support regimens.

(6) Americans are now beginning to take more responsibility for their own personal health. And this has been buttressed by a concept known as health promotion. Through much publicity, it is educating people to be responsible and moderate in taking good care of themselves. It involves a broad range of research-based guidelines including diet and moderate alcohol consumption, exercise and other identified healthy living practices.

(7) Many of America's large industrial corporations have instituted alcoholism-oriented employee assistance programs. This inexpensive and cost effective mechanism for early identification and rehabilitation of problem drinkers has had a profoundly positive impact.

(8) Many of America's college and university campuses now have organized student alcohol awareness programs which are endorsed

by the school administration officials and which are proving effective in developing healthier behavior patterns by students.

The harsh stigma associated with alcoholism in America has been greatly reduced. As a result, hundreds of thousands of problem drinkers have come out of the closet at increasingly earlier stages of their problem drinking. They have sought help, and they have returned to productive, sober lives.

America has, indeed, made significant headway toward developing a more reasoned attitude about alcohol use and alcohol abuse. This, in turn, has allowed for a more reasoned, effective approach in dealing with alcoholism and problem drinking.

In working toward the furtherance and refinement of these advancements, it is absolutely essential for all parties to understand that actions taken on any one of the several complex alcohol-related problems can have much impact—either positive or negative depending on the action taken—on the others. Drunken driving, the special problems related to women, the general problem of the illness alcoholism, the illicit moonshine business, problem drinking in the work force, and others, are each part of the larger problem just as adolescent alcohol abuse is part of the larger problem.

Positive messages and parental example which reinforce responsible behavior are much more likely to have the desired impact than would be the case with negative messages. This is especially true with adolescents and younger adults.

Now, finally, Madam Chairman, according to Mark Keller, the internationally acclaimed and foremost historian concerning alcohol in society, throughout 4,000 years there have been two overriding determinants in any society's stance concerning either consumption of alcohol or abstinence from alcohol. These are social customs and religious doctrines. Specific laws which seemingly work in nations like Sweden are simply a reflection of the social customs and religious doctrines of those societies which are invariably homogeneous in their stance on alcoholic beverages.

I might point out that the United States is even less homogeneous today than it was more than 50 years ago when we overwhelmingly threw out the ultimate sanction of prohibition. And I don't think that a nationwide restrictive Federal law can be expected to work beyond the most elementary laws of taxation, policing for illicit production, and quality control. Those were the only three tolerated following prohibition. They are the only three that have been on the books since prohibition. I think they are workable laws. They are needed. However, because of cultural differences and religious differences, demographic differences across the board, what might be an appropriate piece of legislation for the State of North Dakota might be totally uncalled for for the State of New York, so different are they in demographic composition.

Thank you very much for the opportunity to testify.

Mrs. BOGGS. Thank you very much.

[Prepared statement of Augustus Hewlett follows:]

PREPARED STATEMENT OF AUGUSTUS H. HEWLETT, PRESIDENT, ALCOHOL POLICY COUNCIL, WATERFORD, VA

Mr. Chairman and distinguished committee members:

I am Augustus H. Hewlett, president of the Alcohol Policy Council.

Having served for more than 25 years in leadership positions in the field of alcoholism, I have long been concerned with the full range of alcohol-related problems in America.

The Alcohol Policy Council concerns itself with the full array of public policy issues and the most effective methods of alcohol problem prevention.

We promote the educational systems approach which has a proven and impressive record as the best method for reducing alcohol-related problems in polycultural America.

Whereas many sound and positive activities have taken place on alcohol-related problems including adolescent alcohol abuse, these problems deserve even more special, informed attention and well thought out, carefully constructed activities involving the broad range of nationwide educational stysems. Included in this matrix are radio, television and the print media; the family, churches and synagogues; the school systems; business, industry and labor; the judiciary and law enforcement agencies; organized sports, organized youth groups and civic clubs; philanthropic foundations; student groups; appropriate public agencies at all levels of government including elected officials, plus the relevant professional and academic disciplines.

If all segments of the nation's educational systems cooperate on the dissemination of consistent, positive messages aimed to reduce these problems, the outlook for major accomplishment is, indeed, bright.

The goal for the year 2000 could well be the attainment of a healthy American atmosphere—one which will be conducive for those who can drink and who choose to drink, to do so in moderation and without guilt or fear; for those choosing to abstain to enjoy the same degree of freedom; and, for those who, for whatever reason, develop drinking problems, to recognize those problems at the earliest possible stage and to seek appropriate help.

Such an atmosphere, developed to its fullest potential, will, inevitably, result in the reduction of all alcohol-related problems to their minimal incidence.

We should also recognize that significant advancements toward the development of this ideal national atmosphere have been made in recent years. Some outstanding examples are:

1. The American people have come to accept the illness nature of alcoholism.

2. It is no longer considerd heroic by a growing number of younger drinkers to over-indulge. The "forbidden fruit" syndrome has been reduced. Concerted efforts to further reduce this mystique are called for.

Fortunately, early age alcohol abuse seems destined to decline in any event, because of two phenomena. First, the age group, 16–30, is declining as a percentage of the total population. Second, in American history the smaller that age group is as a percentage of the total population, the more its individual members have conformed with societal customs and reasonable laws.

3. To an increasing degree, no matter what age group is involved, it is no longer considered unsociable to choose non-alcoholic drinks at social functions.

4. Drunkenness is no longer considered humorous by a large and growing number of Americans. The rewards reinforcing drunken behavior, therefore, have been reduced.

5. More American businesses are adding alcoholism as a coverable diagnosis in their group health insurance plans. As a result, alcoholism is fast becoming accepted in the main stream health care delivery system. This is where it should be with the appropriate specialized medical, treatment and support regimens.

6. Americans are now beginning to take more responsibility for their own personal health. This has been buttresed by a concept known as health promotion. Through much publicity, it is educating people to be responsible and moderate in taking good care of themselves. It involves a broad range of research-based guidelines including diet and moderate alcohol consumption, exercise and other identified healthy living practices.

7. Many of America's large industrial corporations have instituted alcoholism-oriented Employee Assistance Programs. This inexpensive and cost effective mechanism for early identification and rehabilitation of problem drinkers has had a profoundly positive impact.

8. Many of America's college and university campuses now have organized student alcohol awareness programs which are endorsed by the school administration officials and which are proving effective in developing healthier behavior patterns by students.

The harsh stigma associated with alcoholism in America has been greatly reduced. As a result, hundreds of thousands of problem drinkers have come out of the closet at ever increasing earlier stages of their problem drinking, sought help and returned to productive, sober lives.

America has made significant headway toward developing a more reasoned attitude about alcohol use and alcohol misuse. This, in turn, has allowed for a more reasoned, effective approach in dealing with alcoholism and problem drinking.

In working toward the furtherance and refinement of these advancements, it is essential for all parties to understand that actions taken on any one of the several complex alcohol-related problems can have much impact (either positive or negative depending on the action taken) on the others. Drunken driving; the special problems related to women; the general problem of the illness, alcoholism; the illicit moonshine business; problem drinking in the work place; and others are each part of the larger problem just as adolescent alcohol abuse is part of the larger problem.

Positive messages and parental example which reinforce responsible behavior are much more likely to have the desired impact than would be the case with negative messages. This is especially true with adolescents and younger adults.

Thank you for the opportunity to testify.

Mrs. BOGGS. We would now like to hear from John B. Burcham, Jr., who is the chairman of the Licensed Beverage Information Council of Washington, DC.

Welcome, Mr. Burcham.

STATEMENT OF JOHN B. BURCHAM, JR., CHAIRMAN, LICENSED BEVERAGE INFORMATION COUNCIL, WASHINGTON, DC, ACCOMPANIED BY PAUL GAVAGHAN, SECRETARY-TREASURER, LICENSED BEVERAGE INFORMATION COUNCIL

Mr. BURCHAM. Thank you, Madam Chairman, and members of the committee good morning. I am John Burcham, and I am chairman of the Licensed Beverage Information Council. I appreciate this opportunity to testify this morning.

In these days of concern over teenage drinking, fetal alcohol syndrome, drunk driving and other alcohol abuse problems, the licensed beverage industry is demonstrating its sense of social responsibility through the industrywide efforts being sponsored by the LBIC.

The LBIC is made up of the leading 10 industry associations representing those who produce, import, distribute and sell beer, wine and spirits in this country.

The focus of the LBIC efforts is on public education. Ours is not an advocacy group on public policy issues. Our goal is simply to assist in finding and communicating the facts regarding problems related to alcohol misuse.

Since 1979 the LBIC has followed a multimedia, multiagency strategy with specific target audiences, especially on issues such as fetal alcohol effects. There is no single group possessing all the expertise and outreach necessary for such programs.

This morning I can only highlight our efforts addressing the problems of excessive drinking that affect children, youth and families. Projects supported by the LBIC are the ultimate responsibility of independent organizations specializing in research, education, treatment and traffic safety. They stand squarely behind the programs they prepare, but which LBIC support makes possible. Copies of our program brochure are available for you to examine in detail today and later along with a much more detailed testimony.

While the LBIC is the first industrywide public education effort, I would point out that the industry trade associations and member companies also carry on their own extensive public education campaigns and research support programs. These are detailed in our written testimony, but here are just a few concrete examples.

In the State of California, the Wine Institute has joined with a coalition of leading groups and prominent citizens in the Community Mobilization for Action Program. Thanks to the Dear Colleague letter that went around Congress, urging Congressional support, the family awareness program sponsored by the Wine and Spirits Wholesalers of America is helping motivate parents to discuss alcohol with their children.

The Distilled Spirits Council of the United States has sponsored the cooperative National Football League TV public service campaign for the past 9 years.

The U.S. Brewers Association has sponsored since 1979 a nationwide alcohol awareness program entitled "Think Twice . . . About Drinking."

The National Licensed Beverage Association has a program of server education called "Techniques of Alcohol Management."

My own organization, the National Liquor Stores Association, sponsors a program called "Yield the Keys" to reduce drunk driving. And there are many examples of items that go out to people that remind them when they get in a car, if they have had anything or too much to drink, to yield the keys.

Teenagers and their parents require information from sources that offer credible, factual information. We don't believe in alarmism, conjecture or myth, which often goes under the label of public education.

We are focusing much attention on the drinking and pregnancy issue, with emphasis on research and medical education. LBIC is now recognized as a prime public education source on fetal alcohol effects.

LBIC has cosponsored with the U.S. Department of Health and Human Services the highly successful "Healthy Mothers, Healthy Babies" campaign, which functions through more than 8,000 clinics, and has provided information to at least a million pregnant women. We were honored to receive the HHS award signed by the Surgeon General. Phase II of this campaign will be launched soon.

Also of note have been the extensive medical education and publication activities of Dr. Henry Rosett and Lyn Weiner of Boston University, School of Medicine. Their research is unrivaled. Their model intervention program has saved lives, and has been adopted by the Commonwealth of Massachusetts and the Swedish Government.

The second major LBIC program emphasis has been on alcoholism as a treatable disease. The emphasis here is on a message of hope, offering practical information to treat disease, rather than giving up hope and the usual hand-wringing.

An innovative project is being conducted by the Alcohol and Drug Problems Association to provide information on drinking problems among working women. This effort was made possible by the ADPA women experts in research, education and treatment.

In addition, we have funded the American Council of Alcoholism, whose publication answers the most frequently asked questions about alcohol abuse. This has reached more than 2 million people.

I am glad to announce two innovative projects that will be launched soon. The first is a special education program to be conducted by the North Conway Institute targeted at all the churches of America. The second is a special effort by the National Association for the Prevention of Child Abuse, whose new brochure will address a problem that needs to be tackled more effectively.

Our third emphasis area involves the drunk driving problem. With the support of the U.S. Department of Transportation and the Outdoor Advertising Association, more than 6,000 billboards have been posted throughout America featuring the "Friends don't let friends drive drunk" intervention approach. In addition, 90 percent of all television and radio stations have carried our special series of public service announcements, thanks to the National Association of Broadcasters and its members. This theme has caught on in the American consciousness.

We have been pleased with the encouragement the LBIC has received. The President commended our program in a national address on December 17, 1983. Carlton Turner, White House Adviser, has endorsed our program in testimony before a Senate committee, as has Dr. William Mayer, now Assistant Secretary for Health Affairs at the Department of Defense. We appreciate the continuing support we have received from the Treasury Department.

The LBIC recognizes continuing national public education needs and pledges to continue these important programs. We believe profoundly in the importance of the family, the school, community and religious education as the prime forces for a reduction of alcohol abuse problems affecting children, youth and families. A wealth of research and experience confirms the value of this approach.

In concluding, Madam Chairman, I would like to introduce Paul Gavaghan, to my right, who is secretary-treasurer of the LBIC since 1979, and is also a vice president of the Distilled Spirits Council of the United States, and he may be able to assist me in answering any questions that you might have.

Thank you very much.

Mrs. Boggs. We thank you, too, very much for being with us.

I hope that all of you recognize that your testimony and your presence here has meant a great deal to this committee. If you see us going in and out, it is because at this time of year many of us, particularly those who happen to be on the Appropriations Committee, are marking up or writing bills that affect many areas, of course, of our national life.

And we have had, in addition to those who have been able to ask questions, with us Mr. Wolf, Mr. Anthony, Mr. Weiss, and Mr. Levin. And now I am going to ask your indulgence to have Mr. Wheat of Missouri to come and chair in my absence, because I have been asked to come to cast a vote in another committee.

And I thank all of you very much for your testimony and for being with us on this most important inquiry that we are conducting today. And I will be back as soon as I can. Thank you so much.

Mr. Wheat [presiding]. Gentlemen, we appreciate your testimony this morning. I understand that Mr. Burton has questions of you that he would like to ask at this time.

Mr. Burton. Thank you, Mr. Chairman.

First of all, I would like to commend the alcohol industry for doing some advertising to bring about a public awareness of the problem of alcoholism. But it appears to me after seeing all the signs and billboards, television commercials and radio commercials, that a great deal more needs to be done than has been done. We have had a lot of instances of young kids in grade school and high school in Indiana that have been addicted to alcohol, and the educational program appears to me to be insufficient and a great deal more attention needs to be directed in this area.

It seems to me there is somewhat of an inconsistency when on one hand you are advertising against the perils of alcohol abuse and on the other hand you are spending billions of dollars advertising for people to drink more booze.

And so I was going to ask this question of those of you in the alcohol industry. Don't you think in order to make sure that the public is really aware of the alcohol problem a nationwide educational program administered by the States and may be even legislated by State legislatures would be advisable and to be shown on public television and through the individual television stations and radio stations? Don't you think a nationwide program legislated by each of these individual States would be preferable and paid for possibly with excise taxes added to the cost of beer and liquor?

Mr. **Gavaghan.** In speaking on behalf of the Distilled Spirits Council, we already have sponsored, Congressman, extensive programs of education throughout the country. This need has been surveyed by various groups, establishing the wide prevalence of such programs, including our own organization's.

The quality of education is very uneven because, as this panel reflects, there are differing points of view on the nature and role of alcohol in American society. With a large segment of American society abstinence is the norm. Moderation is the norm for the prevalent majority. And for others, unfortunately, there is ambivalence on the part of parents about alcohol, which is reflected later in problems.

Mr. **Burton.** Well, let me ask my question.

Mr. **Gavaghan.** Yes.

Mr. **Burton.** My question is this. Don't you think it would be wise to have a nationwide educational program paid for by the liquor industry with excise tax moneys to make sure that the public is made aware on an even basis of the perils of alcohol?

Mr. **Gavaghan.** Alcohol education is not the same as education about the perils of alcohol. I would object to the method of funding because it obviously is the earmarked tax approach, which tends to create a sheltered source of income for programs. The important thing is to have education conducted as an essential part of the prevailing American fabric. For example, the various States have their own boards of education, their own State departments of education. Alcohol education activities are being extensively conducted under that framework today. And I would advise the committee to take a look at the extent and the expense involved in the current conduct of alcohol education programs throughout the country.

Alcohol education programs include but are not limited to the evils of alcohol, the dangers of alcohol, which really mean the dangers of excessive, chronic drinking. Chronic problem drinking. That is only one facet of a comprehensive approach to alcohol education. This country now has tremendous diversity, already extensive education programs throughout the United States conducted by the private sector, by government agencies, and by the school systems. And that diversity reflects the diversity of our country.

Mr. **Burton**. But my question is—and maybe the other gentleman would like to respond to this as well—since the problem is created through the use of alcohol and the alcohol industry, beer, wine, liquor, has derived great profits from this, don't you think it should be up to them through taxation or through the implementing of excise taxes to help pay for the education of the American people as to the perils of consuming too much alcohol?

Mr. **Gavaghan**. I think the principle is essentially wrong because under that principle any product that throughout American society if any substance is misused under that principle, then all of its consumers, the vast majority of whom probably utilize the product or substance safely, are being penalized for problems which are being experienced by a minority. I think the essential principle is wrong.

Alcohol education is a public responsibility of the States as well as the private sector. And I think that it scapegoats alcohol beverages and the industry to make them the target of attacks when, in fact, we have extensive education programs now going on throughout the country. The levels of awareness, for example, of the problems that have been discussed today are at extraordinarily high levels. You would have to be living in a cave not to know about them.

Mr. **Burton**. Well, my only comment would be that there was a doctor in one of the television commercials that said the instances of alcohol abuse among teenagers have been rising dramatically, and so if these educational programs, in fact, are in existence nationwide, they certainly aren't adequate.

Mr. **Gavaghan**. He was inaccurate, by the way. The NIDA study by Lloyd Johnston shows that alcohol and drug abuse problems among adolescents are going down in this country, and a NIDA rep have said recently a high priority should be to find out why this is so.

Mr. **Burton**. Do you have any comments, Doctor, on this?

Mr. **Jacobson**. Well, that is certainly one approach, and I think it is something we would consider, higher excise taxes. Excise taxes haven't been raised since 1951.

Mr. **Burton**. I am talking about specifically utilized for education.

Mr. **Jacobson**. Of course. And I think that would provide an ongoing fund for educational programs. You know, to hear these gentlemen talk about all their educational programs, you would think the problem is solved. I recall the Senate hearing on alcohol problems back in 1976 where industry came up and said it was involved in all these programs on education. But really, their programs tend to be pacifiers. We need good strong programs with groups like the PTA and the National Council on Alcoholism, working with State agencies. We need ongoing funding.

But we shouldn't rely solely on educational programs. It is like we have a lot of problems with burglaries in this country. We don't rely solely on educating kids to be good. We have other programs. We need tough drunk driving laws.

Mr. BURTON. Well, I don't want to monopolize this. I know the chairman has questions, as well as Congressman McKernan. But let me just say that in my view, after having served in Congress, you have to look at the doable. And I think you folks want to do the best job possible to help educate the people of this country regarding the perils of alcoholism. There are some things that are doable, and some things that aren't.

The thing I mentioned a minute ago, excise taxes, possibly levied by individual States, may be pushed a little bit by the Congress, might be a doable thing. But if you start getting into cutting off advertising from television and doing all those things, you are going to have so many forces converging at one point that it is going to be virtually impossible, in my opinion, to get that job done.

Mr. WHEAT. Thank you for your questions, Mr. Burton. Dr. Jacobson, I am afraid we will have to cut you off because we do have a very limited amount of time and Mr. McKernan, I believe, has questions for you. Perhaps you will be able to respond to him.

Mr. MCKERNAN. Thank you, Mr. Chairman.

I direct this to Mr. Reid since we are all in the same business here.

We all know the power of television and hope that the public will respond appropriately. If it doesn't for you, at least you can go to a new series. We look for another profession.

Mr. REID. Or a series.

Mr. MCKERNAN. Exactly. [Laughter.]

I think that we all have to understand the power of television. And I guess I would just ask you, since you understand it as well as anyone in the room, whether there isn't some way that we could direct our attention to the content of ads? Understanding that some of the people in the industry have stated, probably correctly, that alcohol isn't inherently evil and it does not cause a problem for a vast majority of people in this country, but there still is a significant minority for whom it does cause a problem and therefore we have to be aware of it.

Can you see any type of approach on content of advertising, some type of a ratio of health education to just straight marketing techniques in advertising?

Mr. REID. Well, of course, the first thing is what I mentioned briefly in my testimony. I think the appeal to a younger audience by the commercials that we see running is getting a bit out of hand. I think there has to be a concrete effort by anyone and everyone possible to begin to get the advertisers to back off of the youth appeal.

I was looking at one of the spots on television. Some of the kids in the commercials barely look old enough in some States to buy the beverage that they are advertising. I think that that is a direct effort of the advertisers to appeal to a younger audience, and I think that is inherently dangerous. We have an onslaught of commercial advertising, and I have heard a lot of people argue the point, whether the power of television is strong enough to divert the moods and attitudes of a young population. I think it is. Of course they wouldn't be spending the billions of dollars advertising anything on television if it wasn't effective.

So that bothers me. And I guess that is why we passed the resolution to try and get advertisers to at least back off on the characterization of younger people in commercials.

Mr. McKERNAN. I appreciate that. I hope we can perhaps work on the proper approach to that.

Would anybody from NAB like to comment on that suggestion? You can comment as well on whether or not there ought to be greater oversight of the content of advertising by the FCC, for instance.

Mr. HEWLETT. I would prefer to comment on an earlier point—I think it was you who made it—about excise taxes.

Mr. McKERNAN. I was not the one who made it, but I have some interest in that subject, so go ahead.

Mr. HEWLETT. All right. Excise taxes have become a rather important part of the equation of some who would do something about the problems of alcoholism. Now, I would like to point out that in the Soviet Union, for instance, where prices for alcoholic beverages are inordinately high, the reason being I suspect that they use it as a source of revenue.

But it is inordinately high. And as a result of that, Vladimir Treml, an economist at Duke University, documented in his studies that 40,000 deaths by alcohol poisoning occurred in the Soviet Union in 1976, and this resulted from a malodorous home-distilled vodka—Samagon they call it. At the same time in this country, less than 400 deaths were reported for the same cause in the year 1976.

We have just gone through and are emerging from a recession in this country, from the late 1970's up through 1981, 1982, whatever. In those areas of the Nation which were hardest hit by the recession, we saw an increase in the moonshine business. They are going to turn to the less expensive alcohol beverage which is available to them, and I think we have a tremendous responsibility to bear that in mind before talking about increasing alcohol tax revenues.

Mr. McKERNAN. I am about to get the cane here, but let me just have one final question of Dr. Jacobson because it is something that I would like to have addressed. I gathered from your suggestion that you are trying to knock out all sorts of promotions of alcoholic beverages. And do you think that realistically there is any way that this Government can or should get involved in prohibiting for example, the distribution of posters on campuses and those kinds of activities which may be a little bit more Government interference than some of us feel we can swallow?

Mr. JACOBSON. Well, I think if the FTC had any interest in regulating marketing of products, which it doesn't, the FTC could easily do it. Marketing a potentially addictive product to people who are underage or who are addicts already is totally unethical. Some of the things, like wet T-shirt contests and free beer before college football games, that sort of thing, could be abolished just with strong pressure from Congress.

That is really the tip of the iceberg, you know. The heart of their advertising is the television advertising, and probably 800,000 Americans have now signed a petition calling for either equal time or an end to the ads completely. The equal time proposed would ensure that the other side has its say and can explain to people both the problems with drinking and alternatives to drinking. Let us have role models. A Brooke Shields saying "I don't drink a six-pack a day," or some big football player saying, you know, "Beer is going to wipe out. I drink maybe occasionally, but you don't have to drink at all." That would ensure that there would be an equal time.

It was very effective with cigarette smoking, and I think it can be equally effective with alcohol.

Mr. **McKernan**. I appreciate that. Thank you.

Mr. **Wheat**. Again, I am going to have to cut the panel off. Mr. McKernan, thank you for your questions. We are just about out of time for this panel. I would like to ask just one more question if I might.

There seems to be a very clear difference of opinion regarding the effect of the pervasive nature advertising has. Mr. Reid has indicated that he believes advertisers spend the billions of dollars that they do only because the advertising is effective. While we haven't heard testimony about it this morning, we have been told over and over again that, in fact, this is brand preference advertising and that it is not designed to encourage people to actually indulge in alcohol consumption.

I would like to ask both the industry providers if, in fact, that is the attitude that they have, very briefly; and then I would like to inquire of the other gentlemen here whether they believe it has an additional impact.

Mr. **Gavaghan**. Yes; advertising only affects brand preferences. I was going to make recommendations that four whole bodies of research be looked into by the committee if they are interested in the genuine nature and causation of problems with children, youth, and families with regard to alcohol and drug abuse. But getting into this issue, there is no need to even turn to the industry for statements. There is an extensive body of scientific research. We will be glad to give you the references and the summaries. This includes research that the industry did not fund, lest Mike Jacobson will start vilifying again.

Also, too, I would point out that advocacy of advertising restrictions, what you have been hearing from Messrs. Mosher and Jacobson, are essentially the control of alcohol availability ideology which has Sweden as its homeland. That policy includes restrictions on advertising. We will refer you to the new volume by WHO authors, Marcus Grant and Braden Walsh, which show the failure of that theory throughout the world.

Mr. **Wheat**. We are going to give everyone the opportunity to answer additional questions that members of this committee might want to submit. So, if there is additional information you would like to submit to us, this committee would very much like to have it.

Dr. Jacobson, we are going to give you the opportunity to answer the thrust of the statement, which is, I believe, that advertising does not play a major role in encouraging people to drink. Does the research you have looked at counter that or suggest some other result?

Dr. **Jacobson**. I think it is very clear that advertising serves several purposes. One purpose is to switch people from one brand to another. Another purpose is to switch people from beer or wine to liquor. Another purpose is to get current drinkers to drink more of whatever they are drinking. Another thing is to bring people from coffee and soda pop and water to alcoholic beverages. Wine coolers are a classic example, trying to get people from soda pop to alcoholic beverages.

I think very clear evidence about the impact of advertising has to do with a natural experiment that has been conducted. Liquor has not been advertised on radio and television voluntarily. In the last 15 or 20 years, as a percentage of the alcohol people buy, liquor sales have declined steadily. They used to comprise over 50 percent of the alcohol market. Now, it is about a third. Seagrams is fighting to get on television. The liquor producers know the power of advertising. And if you read the trade journals, you see all the marketing people acknowledging that advertising is a very powerful way of getting people to buy more product. It is only the public relations people before congressional committees who pretend that advertising doesn't have anything to do with encouraging people to drink more.

Mr. WHEAT. Mr. Reid, would you like to reply to that?

Mr. REID. Yes. One thing I have heard mentioned, the public service working in television. We know what will happen to public service. They will be running it around 1 to 2 o'clock in the morning, so that really is something that—I don't know the effectiveness of that.

As far as the commercials that are running and the way they relate to young people, the thing that I am really pushing for, and I think everyone at this table—and of course the Members of Congress can help us on—is to deglamorize the use of drugs as much as possible. We are not saying eliminate. I am not for banning advertisements of alcoholic beverages. What I am asking, and what I think the members of our entertainment industry are asking and trying to do is to help deglamorize drugs on a marginal basis, if possible, in all areas of entertainment.

As far as commercials are concerned, I think the ad companies and the beverage companies can do a little more as far as deglamorizing drugs. I mean "being the best you can be" does not mean buying a beer. And I think that things have to be done on a more active basis. I am not saying eliminate commercials. I am just saying give us a more balanced story to give to our young people. Because they are effective. Young people are being led, many of them for the first time, to drink on a very consistent basis because of what they see.

Mr. WHEAT. Mr. Reid, has your Entertainment Council examined the idea of counteradvertising? And if so, has there been a recommendation?

Mr. REID. Mr. Brian Dyak, president of our organization, was just saying we have, of course, looked at it in our meetings, but it doesn't appear to be something that we can do on an effective basis with our organization. Again, we are trying to put all of our efforts in persuading the entertainment industry and advertisers to help us deglamorize drugs and alcohol abuse as much as possible in all areas of entertainment.

Mr. WHEAT. Mr. Reid and members of the panel, I think your appearance here today has already helped to deglamorize substance abuse to some degree already. We appreciate the fact that you would take time to come and testify before us, and we hope that we will have the opportunity for further dialog in the future.

Thank you very much for being here today.

While the second panel is leaving, we would like to call the third panel to testify: the Honorable Howard Duvall, Doreen Sanders accompanied by Constance Kaplan, Sue Rusche, and Sis Wenger. Please come forward to the table.

Good morning. I would like to welcome you to this hearing of the Select Committee on Children, Youth, and Families. First, let me apologize that there are not more members of the committee here, but as I think you heard our chairman say, many members are involved in markups throughout the Congress right now. Your statements will be taken down for the record and made available to all members of the committee.

We, unfortunately, have a very limited period of time that we will have this committee room available to us, so if we could ask you to be brief with your statements, I would appreciate it. And we will immediately proceed to the testimony of Mayor Duvall.

Mayor.

STATEMENT OF HOWARD E. DUVALL, MAYOR, CHERAW, SC

Mr. Duvall. Thank you, Mr. Chairman. It is a real honor for me to be in Washington to testify this morning. I am from a small community in South Carolina; population, 6,000. We have 15,000 in our immediate area. We are represented by Representative John Spratt. We are on the North Carolina line, 100 miles from the coast and 100 miles from the mountains, to give you a little geographical background.

I have been asked to tell you this morning, and have presented a paper to your committee, on the parenting task force and the alcohol and drug task force that has been working in Cheraw for the last 2 years.

During 1982, from Thanksgiving to New Year's, the town of Cheraw lost three teenagers to wrecks directly related to alcohol and drugs. This was not an uncommon occurrence in Cheraw, unfortunately. We had been losing on the average of one youth every 6 months for about 10 years. Not a single graduating class at Cheraw High School during the 1970's and the early part of the 1980's graduated without at least one death among its students.

My class graduated in 1961 from Cheraw High School, and we have lost only one member, even though a lot of us served in the Vietnam war.

The need for action in our community was obvious, but who was supposed to take the lead? It became my burden, as mayor of Cheraw, to take that lead when 3 days before Christmas of 1982 I received a call at 1:30 in the morning from the Cheraw Rescue Squad informing me of a death of a young teenage son of a town employee of mine, a personal friend. And it became my job to go to the man's house and tell the man and his wife that his son, who was a freshman at the Citadel in Charleston, was not coming home; that he was dead, directly related to the amount of alcohol he had consumed that night.

In January 1983, I called together in Cheraw 16 people who had expressed an interest in doing something about the problem that we had in our community. We sat around the table in the Cheraw Town Hall for 2 hours and discussed what could be done and whose responsibility it was to do it. After that 2 hours of strenuous debate, we had divided the responsibilities up into three areas. Those areas were enforcement and the laws that governed alcohol and drugs in the Cheraw community in South Carolina, and what could be done to more strongly enforce those laws and what could be done to write new laws that would help us with the enforcement area.

The second responsibility that we decided that morning was the schools. The schools have our children for a great majority of the time that they are awake during the day. And although we had a lot of foot-dragging among the school officials, we decided that the schools had to play an important role in any comprehensive communitywide program on alcohol and drug abuse.

And the third area of responsibility that was arrived at that morning was that the ultimate and true responsibility for the action of any teenager has to be with the parent. And we needed to do everything that we could to strengthen our parents in Cheraw, to teach them how to be better parents, so that they could protect the lives of these young people that were dying.

Approximately a week or so later, at our second meeting, we added a fourth area of responsibility for what had become known as the Mayor's Task Force on Alcohol and Drugs, and this was a recreation component. Cheraw was a small community. About the only thing that the teenagers had to do in Cheraw was sit on the highway—No. 1 highway that runs right through the middle of town—and watch the cars go by. We have no movie theater. We have no bowling alley. At the time we had no real restaurant for a teenager to go on a date. No real recreational opportunities in Cheraw for the teenagers from around age 12 to 18. Plenty of recreation in sports and all for the younger kids. So, we added a fourth component of recreation.

And I would like to tell you just briefly how that program has progressed. In the enforcement area, we appointed our police chief, or public safety director at that time, as the enforcement committee chairman. We immediately assigned one full-time plainclothes officer to the job of alcohol and drug prevention in Cheraw. This is a community of 6,000 with 20 uniformed police officers, and we have assigned one full-time man to the job of alcohol and drug abuse.

We also obtained a grant for a DUI team in Cheraw from the Governor's office in South Carolina and that, through training of our officers and through increased awareness on the part of the citizens in the community, have drastically reduced the amount of DUI on the highway and the perception of the public toward the people that are apprehended of DUI. The conviction rate has gone up tremendously. It is very hard to convict somebody for driving while intoxicated 4 months after the event, when they are completely sober, they have on their coat and tie, and they are sitting in front of a jury of their peers. In a small community like Cheraw, your peers are usually your neighbors, people you know. It is hard to get a conviction under those circumstances.

But basically, the enforcement area has been most helped by the community's willingness to accept the enforcement of the alcohol and drug laws.

The second area that we were working on was the schools. As I said in my opening remarks, the schools were initially reluctant to have anything to do with our task force. They felt like their job was education, teaching reading, writing and arithmetic and that was it. We were able to convince them through many months of brainwashing that they had an ultimate responsibility just like the parents did to do what they could about this problem.

I will also tell you that we went so far as to work with our local legislative delegation to change the method of electing the school board officials, so that now the Cheraw area has four members directly elected to the school board, and they are having a tremendous impact on the policies of our schools. The head of our parenting commission has been elected to the school board.

The problems in our schools were many. One of them was that the students were allowed to come and go off campus any time they wanted to. Lunchtime they could leave campus for an hour and come back. The afternoon programs in the school, therefore, were sometimes very foggy for a lot of the teenagers because they would come back either stoned or drunk. They also had no qualifications for running for school offices, like the student council president, and it became a custom that the person that could party the best would also be your student council president. We have now turned that perception around, not only because of the efforts in Cheraw, but the efforts of Governor Riley in passing the Education Improvement Act in South Carolina.

The third area that we were working in was the recreation area. We assigned a developer that was on the town staff to work on finding a restaurant to come into Cheraw that would be a nice place for our teenagers to go, something affordable. And we have secured a Quincy's that has opened in Cheraw a year ago. We also are looking at a movie theater. We have not been able to secure a movie theater.

But the biggest item we have on the agenda for recreation is we are creating in Cheraw a teen center using an old National Guard Armory the town purchased for $40,000. We are converting the armory into a community center, and one arm of that community center, one wing that will be added, will be a teen center. We took this to a referendum in November as to whether or not the town of Cheraw should spend tax dollars to operate an alcohol and drug-free center for youths, and it passed the referendum. The council is now willing, in our small town, to spend $500,000 to erect this building and to staff it adequately to provide a nice place for the teenagers to visit on the weekends.

Cheraw is a Southern Baptist town, and when I went out to present this proposal I had to be very careful not to call it a teenage nightclub. That connotation didn't do what we needed to be done in Cheraw. But it, in fact, will be a nice place for them to go, that will have all the jazziness that will attract them to come but also the supervision that they need.

The most important part of our four-pronged program has been our Parenting Commission. Now, this Commission was given permanent status this year when the Town of Cheraw, through the town council, created a commission on parenting. In other words, it will be the responsibility of whoever is mayor, whether I am mayor or not, to see that this commission continues from year to year.

This Parenting Commission started off by asking Carolyn Burns from Washington to come from the National Federation of Parents for Drug-Free Youth. She came to Cheraw at our expense to—we didn't know anybody else had a problem in the world. We knew we had one, but we didn't know anybody else had a problem. Carolyn quickly told us that we were not alone, that there were a lot of resources that could be used to make a community more aware of its problem. She also told us there were resources available in South Carolina, and we have since become very active in the South Carolina alcohol and drug abuse efforts.

But the first goal of the Parenting Commission was to increase community awareness of the problem, and particularly to increase the awareness of parents as to what to look for in your teenager to find out if you have a problem.

We have had tremendous response from our community. We have 250 to 300 parents at our meetings. One of the real benefits of having this kind of commission working out of the mayor's office is that we can mandate that there be no scheduling conflicts when they are having parenting meetings. The recreation department does not schedule Little League ball games, they don't schedule basketball games. The chamber of commerce does not schedule conflicting meetings. So, on the night that we are having a parenting meeting there should be a clean calendar in our community, and we have had good response from it.

The parenting skills that we are beginning to work on now, after our year of hitting on awareness and seeing films like "Epidemic I" and "Epidemic II," the parenting skills that we are working on are being taught to our community by people like Steve Glenn and John Roseman, two noted people in the parenting field.

This is basically what has happened in Cheraw. We are a small community, and so we can have an effect on what happens in our small community. I think it is very much the best way for a program like this in a community like Cheraw to work from the top down. I am in the retail hardware business, and I sell a lot of rope. And if you will picture in your mind a piece of rope, it is a whole lot easier to pull that rope from one end than it is to push it from the back. And that is the way I feel that this parenting group is working in Cheraw. It is being pulled from the front end and it is getting the support of the community. It adds more visibility to the program, and it has been much more effective than any other program in South Carolina that I know of. It is the only program in South Carolina that has a permanent place in the town government.

I appreciate the opportunity of being with you today. My remarks were brief because I was told you had a short amount of time. There are a lot of things I have left out, but I hope you will read my remarks that were presented to you in writing.

Mr. **Wheat**. Mayor, thank you very much for taking the time to come to Washington to give your testimony. We will read your remarks, and we hope to have time at the end for a few questions.

[The prepared statement of Howard Duvall follows:]

Prepared Statement of Hon. Howard Duvall, Mayor, Town of Cheraw, SC

The prevention of alcohol and drug abuse among youth is a problem which occurs in all communities, both large and small. However, regardless of the location, it is a problem which must be appropriately dealt with if today's youth are to have the opportunity to grow up as tomorrow's responsible adults.

In the town of Cheraw, South Carolina, the mayor has taken action to safeguard the lives of the young people of this community from the devastating problems which result from alcohol and other drug abuse. Mayor Howard Duvall's concern for the welfare of the area's youth has resulted in the organization of an ongoing task force whose work has positively affected the residents of this area. For the past few years, the major's office has accepted the responsibility of this challenge realizing that only with the support of the community's highest office could significant changes be made. Through four active committees the task force has worked to prevent the abuse of alcohol and other drugs among youth, particularly in the area of drinking and driving.

Several key individuals in the community continue to volunteer their time and energy to the efforts of the Mayor's Task Force on prevention. In addition to Mayor Duvall, some of the others include Malloy Evans, vice president of Cheraw Yarn Mills, who serves as chairman of the committee on parenting; Elliott Covington of the law enforcement committee; M.B. Godbold, a member of the Chesterfield County School Board, who serves as chairman of the school committee; and Phil Powell, Director of Parks and Recreation for the Town of Cheraw who serves as chairman of the recreational committee. Numerous other individuals and organizations should also be recognized for their commitment to this effort.

MAYOR'S TASK FORCE ON PREVENTION

In almost every senior high school class between 1972 and 1982 in Cheraw, South Carolina, a student has been killed in an alcohol or drug related amtomobile accident. Between November 1982 and January 1983, three teenagers were killed and one was permanently handicapped.

In January 1983, Major Howard Duvall decided to take positive action about the problem and called a special meeting of law enforcement and school personnel, parents and ministers. Participants at this meeting were asked to identify specific problem areas that needed to be addressed in an attempt to deal with this ever-increasing problem. This meeting demonstrated the need for programming involving three basic groups: law enforcement, schools and parents. Problem areas were then identified for these categories.

The problems that were identified as law enforcement issues included the sale of alcoholic beverages to minors; the lack of community support of law enforcement officers; the low rate of arrests and convictions for driving under the influence (DUI) offenders; and the alcohol and drug related problems that were occurring outside of the Cheraw town area of jurisdiction in the county at large. School related issues included poor modeling among some teachers and student leaders; poor use of free time during school hours; smoking on the school grounds; a general lack of discipline in the schools; and over emphasis on athletics to the detriment of the academic program. In the parental area, it was acknowledged that raising children through adolescence is ultimately the responsibility of parents. However, parents were perceived as uninvolved in the concerns of the schools, especially in PTA meetings. Unchaperoned (keg) parties were frequently held at nearby cabins without the parent's knowledge of what was going on. There were few curfews. Parents felt helpless in dealing with their teenagers, particularly regarding the issue of drug abuse.

Two weeks after this special meeting the major met with a smaller group, a group which became known as the Mayor's Task Force on Prevention, which is comprised of committees designed to address these specific program areas. This original task force was comprised of three committees which were each established in order to deal with the specific problems identified as law enforcement, education and parental issues. Within a week however, it became evident that a fourth area had been overlooked. Therefore, a fourth committee was organized to deal with recreational issues identified by the group.

Duvall delegated individual programmatic responsibility to each of the four committees which allowed them the freedom to be creative in developing and implementing appropriate action plans. However, his interest and support have continued through his work with the local ministerial association, radio station and newspaper, all of which have given solid support to the efforts of the task force.

The coordinator of activities of the four committees and staff support is also provided by the Mayor's office.

Following are overviews of each of the four committees and their activities.

PARENTING COMMITTEE ACTIVITIES

One of the first objectives of the parenting committee was to promote community awareness of the extent of the problem and its possible solutions. With assistance from the National Federation of Parents for Drug Free Youth and the South Carolina Commission on Alcohol and Drug Abuse (SCCADA), the task force launched a community-wide effort to expand the consciousness of its 6,000 residents. The first goal was to educate residents about the problem of alcohol and drug abuse in the Cheraw community. Therefore, the parenting committee planned and implemented a series of educational programs for parents in the community. These programs were held in the auditorium of the Chesterfield/Marlboro Technical Education Center and featured highly recognized professionals who discussed topics including sex education, parent/teen understanding and communication, developing capable young people, problems teenagers face, community involvement and alcohol and drug issues. Attendance at each of these events averaged about 250 participants.

In addition, a telephone committee was organized which became the parenting committee's link to the community and resulted in the organization of a network of concerned parents in the area. The committee also reviewed models of prevention activities from other communities and made efforts to publicize programming in a positive way by emphasizing "strengthening the family." A newsletter was developed and disseminated on a quarterly basis. The first 12 to 15 months centered on the theme of breaking down the "wall of denial"—if the community does not perceive something as a problem, then there is not a problem.

The primary goal of this group has been education rather than surveillance. The educational efforts have focused on three areas: alcohol, drugs, and sex, because the committee realized that the local problems involved each of these three interrelated issues, none of which could affordably be neglected.

Because this area of the state has one of the highest teenage birth rates in the country, a 30-hour cirriculum spanning two years has been developed for adolescents in an attempt to reduce risk-taking behaviors and to promote healthy behaviors by focusing on: birth control, sexually transmitted disease, risk-factors influencing reproduction health (such as smoking, alcohol, drugs, nutrition and medical care), childbirth, teen parenting, pregnancy resulting from date rape and stranger rape, communication and respect in relationships, problem solving, healthy decision-making and health-related laws.

At the urging of the parenting committee, local parents have established and enforced curfews for their teenagers and the mayor has encouraged the owners of nearby cabins to discontinue supporting keg parties for youth.

As a result of the parenting committee's impact on the community, the town Council has given it permanent status by establishing a Parenting Commission. The commission's continued existence is guaranteed by a continuing ordinance of the town council.

LAW ENFORCEMENT COMMITTEE ACTIVITIES

One of the primary goals of the law enforcement committee was to increase law enforcement and concentrate its efforts on drug trafficking and DUI offenses. As a result, one law enforcement officer has been assigned the full responsibility of alcohol and drug enforcement. The local police force has become enthusiastic, because they now feel they have the support they need to do the kind of job they have always wanted to do.

The mayor's task force received from the Governor's Office a grant for $19,396 for the local police department. Receipt of this grant was publicized over the radio and in the local newspaper in an attempt to inform the community of the increased emphasis on DUI arrests and convictions. The grant has provided for the purchase of two sets of video equipment used to video-tape DUI offenders; training of two officers in DUI detection and enforcement procedures; and overtime compensation for officers who work on weekends and holidays to enforce the DUI laws. In an attempt to further promote the goals of this committee, the alcohol and drug enforcement officer has delivered more than 35 presentations to local schools, churches and scout troops. The DUI arrest rate has decreased and the conviction rate has increased to almost 100 percent since the grant was awarded. Arrest rates seem to be lower because people in the community are now more knowledgeable and apprehensive about driving under the influence.

SCHOOL COMMITTEE ACTIVITIES

One of the primary problem areas identified by this group was the lack of parental involvement in school related issues. As a result of this committee's activities, however, there has been a dramatic increase in parental involvement in school activities, especially PTA meetings. The principal of the local high school has been working with the student government association consisting of 50 young people who engage in efforts to promote parental attendance at parenting seminars. Poster contests on alcohol and drug abuse prevention have been sponsored; professional speakers have been invited into the schools; and specialized programs for teacher inservice training have been offered; and a sex education program designed for 7th and 8th graders has been adopted by the school board and supported by the junior high school principal.

The school administrators have also prohibited students from leaving the school grounds during lunch hours. School principals have perceived fewer disciplinary and alcohol and drug problems on the school campuses. In addition, there has been a shift from emphasis on athletics to academics at the high school level which is supported by a policy requiring that students have satisfactory grades in order to be eligible to participate in athletic activities.

RECREATION COMMITTEE ACTIVITIES

The recreation committee's first task was to identify problem areas, and it was quickly identified that the Cheraw community had little to offer in terms of recreational activities for youth. For example, there was no movie theater in Cheraw, no bowling alley and a limited selection of restaurants. With the mayor's support, the recreation committee was then able to get a popular restaurant franchise to locate in Cheraw. As a result, the number of teens traveling out of town to dine in other communities has decreased.

Next, the committee established a community center. With support from the town council the National Guard Armory was purchased and converted into a community center for intramural athletic activities such as basketball and volleyball, as well as chaperoned dances. Although this seemed to appeal to children 12 and younger, the committee realized that the Town also needed a teen center for older youth. On November 6, 1984, a referendum was passed by the community authorizing the town council to borrow funds to establish an appropriate teen center. The recreation committee hopes to establish a drug-free center which will attract the Cheraw adolescent population for dating, socializing and dancing. If successful, a teen center would reduce or eliminate 60-mile round trips to movies and private, unsupervised parties in surrounding areas of the county.

The committee has not yet been successful in getting a movie theater chain to locate a cinema in Cheraw. However, as an alternative, the committee is investigating the possibilities that would allow large screen VCR's to be housed within the teen center facility.

FUTURE PLANS

The Commission on Parenting and the mayor are already making plans for future activities. They hope to implement programs which will gain the interest of those parents who originally participated in the series of educational programs designed for parents of 9- to 13-year-olds. These parents are now interested in acquiring skills necessary for parenting older adolescents. In addition to this group, there is another generation of parents whose children are just arriving at middle school age. Therefore, a re-cycling of the first series of programs must be planned and implemented for this group. There is also a need for parenting seminars for mothers and fathers of children five to eight years of age.

The task force members realize that an individual is not born with the skills necessary to effectively deal with varying levels of child growth and development, but that these skills must be acquired. Today, more than 300 adults and the Mayor's Task Force on Prevention have come to believe that through community action and involvement "you can make a difference."

Mr. WHEAT. I would like to call Doreen Sanders, accompanied by Constance Kaplan, if you would provide your testimony.

STATEMENT OF DOREEN SANDERS, STUDENT ASSISTANCE COUNSELOR, WESTCHESTER COUNTY DEPARTMENT OF MENTAL HEALTH, WESTCHESTER COUNTY, NY

Ms. SANDERS. Good morning. My name is Doreen Sanders. I am a student assistance counselor for the Westchester County Department of Community Mental Health, Student Assistance Program. I am placed at a Westchester County high school and middle school. This program was started in 1979 in 6 high schools and is now in 30 high schools and 6 junior high schools in our county. It is currently being replicated in Connecticut, Illinois, Massachusetts, New Hampshire, New Jersey, New Mexico, Oregon, Virginia, Rhode Island, the Seneca Indian Nation, and in four other counties in New York State.

One of the unique features of the Student Assistance Program is that it provides services in the school that usually are only available to students in alcohol, drug or mental health clinics. As a result, students and parents are more likely to seek help because there is easy access to services and a lack of stigma. Therefore, many students get help before their problems become serious.

Help in the form of counseling and referral when necessary is provided by a student assistance counselor, who is placed at each school from 1 to 5 days per week depending on the size of the school. Student assistance counselors conduct individual and group counseling sessions for students with school, family, peer, alcohol, drug or other personal problems. Students are referred by school administrators, guidance counselors, teachers, parents, friends, and by themselves. Self-referrals account for more than half of all referrals, followed by friends referring friends.

In addition to counseling students, the student assistance counselors conduct informational presentations on adolescent alcohol and drug issues to parents and community groups to increase their awareness and stimulate the formation of parent/peer support groups and task forces.

As you know, adolescent substance use is widespread in every community in this country. Even though most drinking and driving use occurs on weekends and evenings, parents look to the schools to provide leadership in dealing with this problem. This is particularly true in communities where the school is the only centralized accessible site for all adolescents. While schools have a responsibility to educate students, I believe they also have a responsibility to help them deal with problems that may interfere with the educational process. Students hungover from weekend drinking or upset by an alcoholic parent are not able to receive the optimal benefits of learning. A lot of attention has been given to teenage substance use, but up until very recently the problems of children of alcoholics have been ignored, even though they are the group most at risk for becoming alcoholics and drug abusers.

Studies show that children of alcoholics are overrepresented among students with school behavior problems, underachievers, truants, runaways, child abuse cases, and adolescents involved in the juvenile justice systems. Even the children of alcoholics who seem to do well have difficulties in their interpersonal relationships and experience low self-esteem. We have found that by providing services to children of alcoholics in schools their attendance improves and their own use of alcohol and drugs decreases.

Since 1979, the Student Assistance Program has provided services to approximately 4,500 Westchester County students with alcoholic parents. This represents 30 percent of all students seen. Without an in-school student assistance counselor whose only job is alcohol and drug prevention and intervention, most of these students would never receive help for this central problem in their life.

Students involved in the program for their own substance use benefit as well. An evaluation of the program showed that 94 percent of students reporting use of marijuana within 30 days of a pretest reported no use of marijuana within 30 days of the posttest; 63 percent of students reporting use of alcohol within 30 days of a pretest reported no use of alcohol within 30 days of the posttest; and 100 percent of the students who reported being "high" at school on marijuana within 30 days of the pretest reported not being "high" on marijuana within 30 days of the posttest.

For students who came to the student assistance counselor for other problems and did not use drugs or alcohol, alcohol or drug use was prevented. Reducing the number of adolescents involved in alcohol and drug-related automobile accidents is also a focus of the Student Assistance Program. Of the 30 high schools in our county that participate, 25 have started SADD chapters or a Safe Rides Program.

All that I have said illustrates that the Student Assistance Program is effective in helping children of alcoholics and in preventing and reducing substance use. I believe this program is successful because of the unique partnership arrangement in operating and funding the program. An agency other than the school—in our case, the county mental health department—employs, trains and supervises the student assistance counselor who is placed at the school. The school pays for 50 percent of the cost of the counselor's salary and fringe benefits. The other 50 percent comes from State and county funds.

I urge you to consider making Federal funds available that can be matched with local funds so schools can implement Student Assistance Programs and provide these specialized counseling services to students.

I would now like to introduce Constance Kaplan—not her real name—a student at our high school. To protect her anonymity, I request that any television cameras not show her face. Thank you.

[Prepared statement of Doreen Sanders follows:]

Prepared Statement of Doreen Sanders, Student Assistance Counselor, Westchester County Department of Community Mental Health, White Plains, NY

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One of the unique features of the Student Assistance Program is that it provides services in the school that usually are only available to students in alcohol, drug, or mental health clinics. As a result, students and parents are more likely to seek help because there is easy access to services and a lack of stigma. Therefore, many students get help before their problems become serious. Help in the form of counseling, and referral when necessary, is provided by a Student Assistance Counselor who is placed at each school from one to five days per week depending on the size of the school. Student Assistance Counselors conduct indivudual and group counseling sessions for students with school, family, peer, alcohol, drug, or other personal problems. Students are referred by school administrators, guidance counselors, teachers, parents, friends and by themselves. Self-referrals account for more than half of all referrals followed by friends referring friends. In addition to counseling students, Student Assistance Counselors conduct informational presentations on adolescent alcohol and drug issues to parents and community groups to increase their awareness and stimulate the formation of parent peer support groups and task forces.

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I would now like to introduce Constance Kaplan, not her real name, a student at our high school. To protect her anonymity, I request that any televison cameras not show her face.

Mr. **Wheat**. Ms. Kaplan, you may proceed.

STATEMENT OF CONSTANCE KAPLAN

Ms. **Kaplan**. I am here today to tell you about a friend of mine. About 4 years ago she discovered that her father was an alcoholic. Even though her parents were divorced and she wasn't living with him, she realized that being around him, in the car with him, seeing him and talking to him was becoming unbearable. It seemed that this disease made him more irritable and more difficult to deal with. Soon after Christmas about 2 years ago, he made sexual advances toward her. She had nowhere to turn. She was frightened to say anything to anyone about what had happened. She felt it was all her fault: that, in some way, she had done something wrong. She even became suicidal, all because of this one man. She had a horrible self-image. She had no way to get to a public clinic; and even if she did, she was too scared to do anything about it.

Soon afterwards, she made a friend that, in essence, saved her life. After a short, yet immensely productive time, she felt better about herself and was able to cope with her father. She is here with us today because someone cared, someone was available, someone made her a little stronger, and someone made her care about herself. That someone was her student assistance counselor, and that girl is me.

Statistics show that one out of every two children born to alcoholics will become alcoholics themselves. I don't know if I will ever be that one, but I am confident I won't.

Still the question remains as to whether these children become alcoholics for genetic reasons or as a result of growing up in an alcoholic environment. I am sure that both experts and non-experts alike will agree that a clue to this answer lies deep within the structure of the alcoholic offspring. The classic roles of these offspring are outlined in a novel by Sharon Wegscheider entitled "Another Chance: Hope and Health for the Alcoholic Family." The children usually fall into one of four categories. However, many COA's might relate to specific traits from each group. These categories being the family hero, the scapegoat, the lost child or the mascot.

In brief, the family hero is the teacher's pet. His or her academic excellence is reflective of his entire life. He is a leader in school and at home.

The scapegoat is almost always in direct contrast with the hero. He is the family troublemaker, and is so simply for attention. This child is the most likely to become an alcoholic and the most likely to commit suicide.

Next, we see the lost child, or the house angel. He usually remains in the background of all facets of his life. He does not strive for achievement because he fears all criticism, and, typically, blames himself for everything. He usually is shy and oversensitive.

Finally, we see the mascot. He or she is overactive and anxious. More than not, he will find any way possible to focus attention on himself. Eventually, alcohol and tranquilizers will be abused to calm him down; and, most unfortunately, he chooses mental illness, and many times suicide, as his escape.

In the last 25 years, suicides among women have increased 250 percent and 300 percent among men. Furthermore, 30 percent of all suicides show evidence of alcoholism as a key factor. Yet, the statistics do not include any record of the suicide percentages for COA's. Still, any person from an alcoholic family is at greater risk for suicide than a person coming from a nonalcoholic environment.

A keynote in understanding and preventing alcoholism is the realization that the disease is not, by any means, limited to one specific race, color, religion, age group, geographic location, marital status, economic status or employment area. Alcoholism is a nationwide fungus that grows in every corner of our cities, towns, counties and States. One must also realize that 1 out of every 13 children lives with alcoholism in their home.

In conclusion, to coin a phrase, where are we? We know the statistics, what can we do about it? Because alcoholism is so very widespread it is difficult to effectively aid the children of alcoholics. Many times children will deny that a problem exists, and other times they are too scared to say anything about it, and sometimes they don't know what is going on. Services for these children include Al-Anon, Alateen, mental health clinics, and school staff such as teachers and guidance counselors.

Many feel that to go to Al-Anon and Alateen you must have the disease, and for younger children meetings are hard to reach. Also difficult to attend is the local clinic. Many are too scared to go, and others don't want their parents to know that they are going, which makes transportation difficult.

Teachers and guidance counselors are hard to talk to because they are viewed as authority figures. However, there is another alternative. This is provided by a program called the Student Assistance Program. These counselors are confidential friends that offer a strong shoulder and an educated ear. This program, which is presently being spread in the Westchester area, is amazingly successful. The counselors deal with alcoholism, drug abuse, and many times, personal problems that are not drug related. The counselors are confidential, accessible, concerned and knowledgeable.

The Declaration of Independence states:

> "We hold these Truths to be self-evident, that all Men are created equal, that they are endowed by their creator with certain unalienable Rights, that among these are Life, Liberty and the Pursuit of Happiness—"

If this program has the ability to reach out to hundreds of students in the New York area and further their pursuit of happiness, and if these programs are able to save even a handful of lives, not unlike my own; is it not then our duty, as well as our responsibility as human beings, to ensure these unalienable rights and protect what will be the next generation to be seated in this room?

Thank you.

[Prepared statement of Constance Kaplan follows:]

PREPARED STATEMENT OF CONSTANCE KAPLAN

I am here today to tell you about a friend of mine. About four years ago she discovered that her father was an alcoholic. Even though her parents were divorced and she was not living with him, she realized that being around him, in the car with him, seeing him and talking to him, becoming unbearable. It seemed that this disease made him more irritable and more difficult to deal with. Soon after Christmas about 2 years ago he made sexual advances towards her. She had nowhere to turn. She was frightened to say anything to anyone about what had happened. She felt it was all her fault that, in some way, she had done something wrong. She even became suicidal—all because of this one man. She had a horrible self-image. She had no way to get to a public clinic, and even if she had, she was too scared to do anything about it.

Soon afterwards she made a friend that, in essence, saved her life. After a short, yet immensely productive time, she felt better about herself and was able to cope with her father. She is here with us today because someone cared, someone available, someone made her a little stronger, and someone made her care about herself. That "someone" was her Student Assistance Counselor and that "girl" is me.

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Still the question remains as to whether these children become alcoholics for genetic reasons or as a result of growing up in an alcoholic environment. I am sure that both experts and non-experts alike will agree that a clue to this answer lies deep within the structure of the alcoholic off-spring. The "Classic Role" of these children are outlined in a novel by Sharon Wegscheider entitled, *Another Chance: Hope and Health for the Alcoholic Family*. The children usually fall into one of four categories, however many COA's might relate to specific traits from each group. These categories being; The Family Hero, The Scapegoat, The Lost Child or The Mascot. In Brief, The Family Hero is the typical "Teacher's Pet" his or her academic excellence is reflective of his entire life. He is a leader in school and at home. The Scapegoat is almost always in direct contrast with the Hero. He is the family troublemaker, and is so simply for attention. This child is most likely to become an alcoholic and is the most likely to commit suicide. Next, we see the Lost Child or the house "Angel" he usually remains in the background of all facets in his life. He does not strive for achievement because he fears all criticism and blames himself for everything. Typically, the Lost Child is shy and over-sensitive.

Finally, we see The Mascot. He or she is overactive and anxious. More than not he will find any way possible to focus attention on himself. Eventually alcohol and tranquilizers will be abused to calm him down. Most unfortunately he chooses mental illness and many times suicide as his escape.

In the last 25 years suicides among women have increased 250% and 300% among men. Furthermore, 30% of all suicides show evidence of alcohlism as a key factor. Yet the statistics do not include any record of the suicide percentages for COA's. Still, any person from an alcoholic family is at a greater risk for suicide, than a person coming from a non-alcoholic environment.

A keynote in understanding and preventing alcoholism is the realization that the disease is not, by any means, limited to one specific race, color, religion, age group, geographic location, marital status, economic status or employment area. Alcoholism is a nationwide fungus that grows in every corner of our towns, cities, counties, and states.

One must also realize that one out of every thirteen children lives with alcoholism in their home.

In conclusion (to coin a phrase), where are we? We know the statistics; what can we do about it? Because alcoholism is so very widespread it is difficult to effectively aid the children of alcoholics. Many times the children will deny that the problem exists and other times may not understand what exactly is going on. Services for these children include Alanon, Alateen, Mental Health Clinics and school staff such as teachers and Guidance Counselors. Many feel that to go to Alanon and Alateen you must have the disease and for the younger children these meetings are hard to reach. Also difficult to attend, is the local clinic. Many are too scared to go and others don't want their parents to know that they are going, which makes transportation difficult. Teachers and Guidance Counselors are hard to talk to because they are viewed as authority figures. However there is another alternative. This is provided by a program called, The Student Assistance program. These counselors are confidential friends that offer a strong shoulder and an educated ear. This program which is presently being spread in the Westchester area is amazingly successful. The counselors deal with alcoholism, drug-abuse and many times personal problems that are not drug-related. The counselors are confidential, accessible, concerned and knowledgeable.

The Declaration of Independence states, "We hold these truths to be self-evident, that all men are created equal; that they are endowed by their Creator with certain unalienable Rights; that among these are Life, Liberty and the pursuit of Happiness." If this program has the ability to reach out to hundreds of students in the New York area and further their "pursuit of happiness" and if these programs are able to save even a handful of lives, not unlike my own, is it not then our duty as well as our responsibility as human beings to ensure these unalienable rights and protect what will be the next generation to be seated in this room? Thank you.

Mr. WHEAT. Thank you for your testimony, Ms. Kaplan. We appreciate the fact that you would give us your very personal story.

Now, I would like to call upon Sue Rusche for her testimony, please.

STATEMENT OF SUE RUSCHE, COLUMNIST, KING FEATURES, AND EXECUTIVE DIRECTOR, "FAMILIES IN ACTION," ATLANTA, GA

Ms. RUSCHE. I would like to thank the committee for the opportunity to be here today to share my perceptions of the problem of alcohol abuse among children and teenagers. I do so as a newspaper columnist who writes a syndicated column on drug and alcohol abuse and as executive director of the Families in Action National Drug Information Center in Atlanta.

I have included in my testimony some of the columns that I have written and that have been published in papers around the country, including one about the Wine and Spirit Wholesalers' educational efforts to which a gentleman earlier referred. I think their effort to educate parents about how to deal with kids is disgraceful. Because that whole pamphlet and that whole campaign has told parents that they must teach children how to drink responsibly in violation of the law when it is against the law for kids to possess or purchase alcohol. So, you may want to look at that column.

I would like to preface my remarks by saying that all any of us have been asking the alcohol industry to do is to obey the law—nothing more, nothing less. It is a fairly simple concept. But how far industry has been willing to go to violate the law and how vast and extensive the whole alcohol industry has become over the years, is something we are gaining an understanding of through our work and would like to share with you some.

I think that the whole country is now in a state of transition as we move from a universal drinking age of 18 to a universal drinking age of 21. And we thank the Congress for that. Our group, for 2 years in a row, lobbied the Georgia State Legislature to try to get the drinking age raised. We could not do it successfully, and we could not make the argument on the fact that we would save 20 kids' lives a year. What did make the argument with our legislature was the fact that they would lose several million dollars in highway funds. And we are grateful to you for making that possible for us.

With the lower drinking age, we allowed the alcohol industry to swoop in and to market its products to teenagers, and even to children, in very disgraceful ways I think. And we have paid a terrible price for that. I don't have to tell you the statistics, you all know them; you have heard them over and over again.

When we began to grapple with this at home in 1981, we were getting a number of calls from angry parents saying: Why is my child able to buy alcohol when, even with a drinking age of 18, it was illegal for him or her to do that. We formed a task force to look into this problem and to try to correct it. Our county, DeKalb, has a population of half a million people. A measure of how severe our problem is can be seen in the fact that over a 20-year period we have moved from being a dry county to one that has now licensed over 800 establishments to serve or sell alcohol. These include restaurants, bars, package stores, grocery stores, convenience stores, gasoline stations, drugstores, and even K-Marts.

State law provides for the suspension or revocation of a license whose holder sells to minors or violates the law in any other way. When our task force began in 1981, not a single license had been suspended or revoked for sales to minors, even though police had made several such cases. After much study we asked our county commission to revise the ordinance so that we could toughen it and so our police could begin to make cases and our alcohol revenue commissioner could begin to suspend or revoke licenses of suspected stores.

We got the ordinance revised in 1982. There were several strategies involved in that which I won't go into in detail. But one of the things we found was that trying to prove "knowingly selling to a minor" was something almost impossible to do in court, so the ordinance provided for a new phrase: "failure to ask for I.D." We also, the police also moved those cases out of State court and into municipal court where it was easier and quicker to obtain convictions.

After 2 years, a new ordinance, and persistent and remaining complaints from parents about continuing sales to minors and the alcohol-related deaths of several more teenagers in our county, all of whom were under the legal drinking age, we wrote county officials and asked for a list of all licensees in the county and all cases police had made and convictions they had obtained against stores for selling to minors. We found that our police have made 59 cases against 59 stores and have obtained 59 convictions; yet, still no licenses have been suspended or revoked. The task force has organized that list by ZIP Code, and is now sending it to all PTA's for publication in their spring newsletters. Accompanying the list is a cover letter which says: "Families in Action wants parents to know the following stores in your neighborhood have been convicted of selling alcohol to minors in violation of the law. Any questions should be addressed to the alcohol revenue commissioner," whose phone number is included in the letter.

From our experience with the task force and with later lobbying the legislature to try to raise the drinking age to 21 in order to save kids' lives, we have learned that the alcohol industry is considerably larger than just the manufacturers of beer, wine, and liquor. Industry also comprises distributors and sellers. Nowhere was this more clearly brought home than when the Georgia Association of Convenience Stores tried to introduce a "get-the-kids" bill last year in response to the work we were doing. Had it passed, which it didn't I am happy to say, the bill would have prohibited prosecuting stores that sell alcohol to minors unless the minor who makes the purchase, including the undercover decoy, is first prosecuted himself.

To us, the answer to this whole problem is simple: The drinking age law must be enforced, and uniformly, against stores that sell alcohol to minors, against parents who serve alcohol to minors at parties in their homes, and even against minors who try to buy alcohol with fake I.D.'s. We must also stop trying to solve the problem with halfway measures such as the SADD contract and such as Safe Ride Home Programs, which, in my view, make things worse by first giving kids permission to break the law, and then by leaving it up to kids to decide when they are too intoxicated to drive.

It should come as no surprise that the alcohol industry widely supports such programs since by enabling kids to keep drinking such programs enable industry to keep selling alcohol to kids. A final way industry tries to circumvent the drinking age law is by developing and distributing educational programs, in the name of public service, to schoolchildren that suggest kids should drink responsibly, again in violation of the law. So long as we continue to equivocate, all of us—parents, teachers, counselors, et cetera—industry will continue to sell alcohol to our kids; and we, as their parents, will continue to spend time and money trying to rehabilitate them. We will continue to nurse them through lifelong injuries, and we will even continue to bury them, until we somehow all reach a national consensus that it is time to enforce the drinking age law.

Thank you.

Mr. WHEAT. Ms. Rusche, thank you very much for your testimony.

[Prepared statement of Sue Rusche follows:]

PREPARED STATEMENT OF SUE RUSCHE

I would like to thank the Committee for the opportunity to be here today to share my perceptions of the problem of alcohol abuse among children and teenagers. I do so as a newspaper columnist who writes about drug and alcohol abuse and as executive director of the Families in Action National Drug Information Center.

As a background note I should say that Families in Action was founded in Atlanta in 1977 to prevent drug and alcohol abuse among children and teenagers. We were responsible for passing the nation's first drug paraphernalia laws in Georgia in 1978. Georgia's laws were the basis for the Model Drug Paraphernalia Act passed by Congress in 1979. Some 35 to 40 states have now adopted the Model Law.

I would like to preface my remarks by saying that all any of us are asking the alcohol industry to do is to obey the law, nothing more, nothing less. It's a fairly simple concept. But how far industry has been willing to go to violate the law and how vast and extensive that industry is is something we have come to understand over the years.

I think we are now in a state of transition as we move from a universal drinking age of 18 to one of 21. With the lower drinking age, we allowed the alcohol industry to swoop in and market its products to teenagers and even to children. We have paid a terrible price as a result.

By the time they reach seventh grade, one-third of the nation's children have started drinking. Two-thirds of our seniors classify themselves as regular drinkers. Forty-two percent say they drink 5 or more drinks at one sitting. The leading cause of death among teenagers is drunk driving. Alcohol and drug-related deaths are so extensive among youth that 15- to 24-year-olds make up the only age group whose life span is actually decreasing.

We began to grapple with all this at home in 1981, when, in response to numerous calls to our Center from frustrated and angry parents, we sponsored a community meeting to look into the problem of illegal alcohol sales to minors. Out of that meeting came the Families in Action Alcohol Task Force whose mandate was to find out why kids were able to buy alcohol in violation of state law and county ordinance and put a stop to it.

Our county, DeKalb, has a population of 500,000 people. A measure of how severe our problem is can be seen in the fact that over a 20-year period we moved from being a dry county to one that has licensed some 800 establishments to sell alcohol. These include restaurants, bars, package stores, grocery stores, convenience stores, gas stations, drug stores, and even K-Marts!

Our county commission chairman owns 2 taverns. At least one other commissioner holds licenses to sell alcohol as well. State law provides for the suspension or revocation of a license when its holder violates any provision of the law, including sales to minors. When our Task Force began in 1981, not one license had been suspended or revoked for sales to minors even though police had made several such cases.

Everyone told us the problem lay in the county ordinance, which had not been revised since originally passed some 17 years before. The ordinance contained so many loopholes that the alcohol revenue commissioner, who has the sole responsibility for suspending or revoking licenses and who is appointed by the county commission chairman, was free to interpret the ordinance any way he chose.

So we asked the county commission to revise the ordinance. One of the provisions we fought for made it an offense to fail to ask for identification, a charge easier to prove in court than the charge of "knowingly" selling to a minor. Part of the strategy behind the new ordinance was to move these cases out of state court, clogged with trying all misdemeanors committed in the county, into municipal court where they could be adjudicated more quickly, making convictions easier to obtain. Faced with a conviction of selling alcohol to minors, the alcohol revenue commissioner would have have no choice but to suspend or revoke the store's license.

The new ordinance was adopted in the fall of 1982 amidst a great deal of hoopla. The Task Force even presented the county commission with a plaque, thanking it for doing it's part to reduce alcohol sales to minors.

After two years, persistent complaints about continuing sales to minors, and the alcohol-related deaths of several more teenagers all of whom were under the legal drinking age, we wrote county officials, asking for a list of all licensees in the county along with their addresses and zip codes, a list of all convictions police had obtained against stores for selling to minors since the ordinance had been revised, and a list of all licenses the county had suspended or revoked for such violations.

Police have made 59 cases and obtained 59 convictions against stores that sold alcohol to minors. With one exception, no licenses have been suspended or revoked. (The exception is the first case that came before the revenue commissioner after the new ordinance passed. A suspension of 6 months was given to the offending store whose owner has managed to continue doing business ever since by appealing the suspension in court after court.)

The Task Force has sent the list to all P.T.A.'s in the county for publication in their newsletters. Accompanying the list is a cover letter which says, "Families in Action wants parents to know the following stores in your neighborhood have been convicted of selling alcohol to minors in violation of the law. Any questions should be addressed to the alcohol revenue commissioner," whose phone number is included.

We will take out a full page ad in the newspaper to publish the list if that's what it takes to stop sales to minors. We will do whatever we have to within the law to force stores to stop selling alcohol to minors. We may run out of patience but we will not give up.

From our experience with the Task Force and with later lobbeying the legislature to raise the drinking age to 21, we have learned that the alcohol industry is much larger than just the manufacturers of beer, wine and liquor. Industry also comprises distributors and sellers. No where was this more clearly brought home than when the Geogia Association of Convenience Stores tried to introduce a "get the kids bill" last year in response to the work we were doing. Had it passed, the bill would have prohibited prosecuting stores that sell alcohol to minors unless the minor who made the purchase, including the undercover decoy, was prosecuted first.

To us the answer is simple: the drinking age law must be enforced. And enforced uniformly -- against stores that sell alcohol to minors, against parents who serve alcohol to minors at parties in their homes and against minors who try to buy alcohol.

We must also stop tryng to solve the problem with halfway measures such as the SADD contract and Safe Ride programs which make things worse by first giving kids permission to break the law and then leaving it up to them to decide when they are too intoxicated to drive. It should come as no surprise that industry widely supports such programs since, by enabling kids to keep drinking, such programs enable industry to keep selling alcohol to kids.

Another way industry tries to circumvent the drinking age law is by developing and distributing, in the name of public service, alcohol "education" programs to schools that teach children how to drink "responsibly," a contradiction in terms since to drink at all children have to break the law to purchase or possess alcohol.

So long as we continue to equivocate, industry will continue to sell alcohol to kids. And we will continue to spend time and money trying to rehabilitate them, continue to nurse them throught lifelong injuries, even continue to bury them until we reach a national consensus that it's time to enforce the drinking age law.

ATFPTALS

STORES AND RESTAURANTS IN DEKALB COUNTY THAT HAVE BEEN CONVICTED OF SELLING ALCOHOL TO MINORS

Zip Code 30027
12/14/83 Russell Service Station, 3860 Moreland Avenue, Conley 30027

Zip Code 30032
4/2/84 Glenwood Shoppette, 4085 Glenwood Road, Decatur 30032
4/27/84 Country Store, 2426 Columbia Drive, Decatur 30032
4/5/83 Big Star, 4572 Memorial Drive, Decatur 30032
6/20/84 Bradshaw Tex-A-Mart, 4640 Memorial Drive, Decatur 30032

Zip Code 30033
6/22/83 Copper Dollar Saloon, 2272 Lawrenceville Highway,Decatur 30033
8/13/83 Majik Market, 2148 Lawrenceville Highway, Decatur 30033
11/28/84 Majik Market, 1537 Clairmont Road, Decatur 30033

Zip Code 30035
12/15/83 H&F #21, 2585 Wesley Chapel Road, Decatur 30035
10/26/84 Crosby's Restaurant & Lnge, 5404 "C" Covington Hwy., Dec. 30035
12/28/84 His & Hers Cocktail Lounge, 3911 Covington Hwy., Decatur 30035
11/28/84 Kwik Stop Foods, 3319 Memorial Drive, Decatur 30035

Zip Code 30058
11/83 Dave's Deli, 7493 Covington Hwy., Lithonia 30058
5/25/84 Dave's Deli, 7493 Covington Hwy., Lithonia 30058
3/10/83 U.S. Service Station, 2841 Turner Hill Road, Lithonia 30058
10/17/83 Kim'S Texaco Lithonia, 2827 Evans Mill Road, Lithonia 30058

Zip Code 30079
7/23/84 Pack N Sack, 3558 E. Ponce de Leon, Scottdale 30079
8/84 Pack N Sack, 3558 E. Ponce de Leon, Scottdale 30079

Zip Code 30083
7/27/84 Godfather's Pizza, 4872 Memorial Drive, Stone Mountain 30083
1/26/84 Stone Mountain Citgo, 5664 Memorial Drive, Stone Mountain 30083
8/27/83 Lingerlong, 5922 Memorial Drive, Stone Mountain 30083
12/18/84 Pic & Pac Food & Beverage, 6098 Memorial Dr., Stone Mnt. 30083

Zip Code 30084
9/9/83 Starvin Marvin, 3356 Lawrenceville Hwy., Tucker 30084
10/26/84 T.J. Applebee's, 4092 Lawrenceville Hwy., Decatur 30084
7/19/83 Majik Market, 3139 Tucker Norcross Road, Tucker 30084
1/17/84 Ken's Pizza, 4437 Cowan Road, Tucker 30084
10/26/84 Mack's Super Market, 4537 Chamblee Tucker Road, Tucker 30084

Zip Code 30088
3/1/84 Stop & Buy Food Store, 4962 Redan Road, Stone Mountain 30088

Zip Code 30307
12/27/84 The Kroger Company, 1554 North Decatur Road, Atlanta 30307
2/25/85 The Dug Out, 1401 Oxford Road, Atlanta 30307

Zip Code 30316
4/27/84 Tenneco Food Store, 1317 Columbia Drive, Decatur 30316
7/23/84 Starvin Marvin Food Store, 2680 Bouldercrest Road, Atlanta 30316

Zip Code 30317
10/20/83 Super Thrift Food Store, 1895 Memorial Drive, Atlanta 30317
8/84 Super Thrift Food Store, 1895 Memorial Drive, Atlanta 30317

Zip Code 30329
9/8/83 Century Center Amoco, 2898 Clairmont Road, Atlanta 30329
10/26/84 Century Center Amoco, 2898 Clairmont Road, Atlanta 30329
11/28/84 Skyland Point Bottle Store, 3342 Clairmont Road, Atlanta 30329
12/84 Skyland Point Bottle Store, 3342 Clairmont Road, Atlanta 30329
12/12/83 Skyland Beverage & Party Center, 3342 Clairmont Rd., Atl. 30329
1/11/83 Alexanders' Eagle, 3300 Clairmont Road, Atlanta 30329
9/8/83 Starvin Marvin Food Store, 1755 Clairmont Road, Atlanta 30329
3/23/83 W. C. Copperfield's, 4075 Buford Hwy., Atlanta 30329

Zip Code 30338
1/29/85 Dunwoody Bottle Shop, 5477 Camblee Dunwoody Road, Dunwoody 30338

Zip Code 30340
6/20/84 The C Store, 5915 Buford Hwy., Doraville 30340
5/3/83 El Chico Restaurant, 5881 Buford Hwy., Doraville 30340
3/2/84 Lottie's Restaurant, 3994 Pleasantdale Road, Doraville 30340

Zip COde 30341
11/28/84 Fine Food Mart, 2898 Chamblee Tucker Road, Chamblee 30341
1/29/85 Fine Food Mart, 2898 Chamblee Tucker Road, Chamblee 30341
4/27/8 Tenneco Food Store, 3625 Chamblee Tucker Road, Tucker 30341

Zip Code 30341
11/28/84 Cat's Super Store, 4405 Chamblee Dunwoody Road, Chamblee 30341
12/84 Cat's Super Store, 4405 Chamblee Dunwoody Road, Chamblee 30341
4/27/84 Cat's Super Store, 4405 Chamblee Dunwoody Road, Chamblee 30341
4/2/84 Savoy Restaurant, 2117 Savoy Drive, Chamblee 30341
10/84 Savoy Restaurant, 2117 Savoy Drive, Chamblee 30341
9/7/84 Shallowford Rd. Quick Mart, 2727 Shallowford Rd., Chamb. 30341

Zip Code 30345
11/28/84 Shallowford Liquors, 2596 Shallowford Road, Atlanta 30345
1/29/85 Ruby Tuesday's, 4800 Briarcliff Road, Tucker 30345

FOR RELEASE THE WEEK
OF FEB. 20, 1984 (COL. 1)

STRIKING BACK

by Sue Rusche

Finding Solutions to Youthful Drinking

Q. I am writing because I need your advice. We live in a small college town where, because of the students, alcohol has always been abundantly available.

Our community theater just finished a play with a very large cast of children ranging in age from 6 to 18. One of the older teenagers offered to host the cast party after the play. She assured the director there would be adult chaperones and no alcohol or drugs at the party.

The party began at 8 in the evening. The first few parents who arrived to pick up younger children around 9:30 walked into a scene of heavy drinking among older children and no parents or other adults anywhere in sight. They decided to stay on as impromptu chaperones and began rounding up six packs of beer and bottles of wine and liquor. The teenage hostess called her parents and asked the volunteer chaperones to come to the phone. Her angry father at the other end told them he had not invited them to his home, that his 18-year-old daughter could handle the party on her own, and asked them to collect their children and leave.

I know all this because my teenager who attended the party came home and told me what had happened. Now she's terrified that she will be ostracized by her friends if I try to do anything about it. The only adult I've talked to about the party is the theater director who says this will never happen again because she will personally see to it that future cast parties take place at the theater with plenty of adult chaperones present.

That's good, but it doesn't address the larger issue of kids drinking at other parties. I told the director we should call a parents' meeting but she said we're talking about the town's "best" families. Most don't know their kids drink, and she's not about to "open that can of worms."

I don't want to alienate my daughter, but I feel something should be done. What would you do?

A. First I would have a talk with my daughter. I'd tell her that anyone who stops being her friend because her mother cares enough about kids to stick her neck out to protect them is really not much of a friend after all. I'd tell her that no responsible parent can sit by and let another party like this one happen again. I'd ask her to think about how she would feel if one of her friends were killed later on because no one had done anything about the problem.

It is clear that something has to be done and it's just as clear that you're the person to get things started. You can count on help and support from the parents of the younger kids who attended the party. They can see the issue more clearly because they haven't yet been hit with the awful pressure adolescents can put on parents. ("But, mom, you'll ruin my social life." "Everyone will think I'm a dork." "Only a nerd would narc on his friends.") Get one or two of them to help you call the parents of the kids in the cast and ask them to a meeting to discuss a problem that affects all your kids.

Don't worry about protecting the town's "best" families from the knowledge that their kids are drinking behind their backs. Many probably already know but don't know what to do about it. They'll learn from the meeting as solutions begin to evolve from the group.

The meeting will be a positive one if you begin it with the announcement that you've all come together to share information in a non-critical, non-blaming way. It's purpose is not to identify "bad" parents but to get together a roomful of good parents who care enough about their kids to be concerned and want to resolve a problem that threatens the health and the very lives of their children.

• • •

Sue Rusche, author and national authority on drug abuse, answers questions from readers in her column. Write to her in care of this newspaper.

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FOR RELEASE THE WEEK
OF MARCH 26, 1984 (COL. 1)

STRIKING BACK

by Sue Rusche

'All those Kids, Drunk and Stoned...'

Q. I am frightened, frustrated and furious. Last Saturday night a 10th grader at the high school my child attends gave a party. He comes from a fine family in our community, but his parents were out of town. Left alone for the weekend, the youngster seized the opportunity to throw a party.

More than 100 kids showed up, most bringing six-packs of beer and bottles of wine. When they ran out of space to park their cars, kids pulled up into neighbors' yards. At least one called police.

There was a game and a dance at the school which many kids attended briefly and then left for the party. Others cruised back and forth between party and game. Concerned for their safety, the school principal called police.

I live a few blocks from where the party was held. My neighbor and I walked through the neighborhood. Kids were literally running wild, coming in and out of the party, hiding behind bushes as one police car after another patrolled the area.

One student, leaving the party in disgust, told us kids were gathered in an upstairs bedroom snorting cocaine, others were smoking pot, nearly all were drinking, some were already drunk. Three boys on their way home said the party was so out of control they called police. Although police spent most of the evening driving slowly through the neighborhood, they never went inside to break up the party.

I am haunted by the specter of all those kids, drunk and stoned, getting in their cars and roaring off into the night. There didn't seem to be any way to stop them. What would you have done?

A. In reality I'd never do it, but I'd have been tempted to let the air out of their tires. At least the intoxicated youngsters would have been prevented from driving anywhere. And more important the kids would have had to call their parents, most of whom tend to believe their own children incapable of such behavior.

* * *

Q. How many marijuana cigarettes, or "joints," will an ounce of marijuana make?

A. There is no simple answer to that question. I've read anywhere from a low of 30 to a high of 75 joints per ounce. It seems to depend on who's rolling the joints and for what purpose.

A pot smoker who buys an ounce of marijuana for his own use may roll fairly large cigarettes that weigh roughly one gram apiece and end up with about 30 joints from that ounce.

A dealer who pays $50 for an ounce, sells individual joints for $1 each, and wants to make a profit is likely to roll smaller cigarettes and end up with as many as 60 joints from an ounce.

Sources at the Georgia Bureau of Investigation say dealers will stretch their yield-per-ounce even more by using two or more rolling papers to "pad" the joint or by adding adulterants to the marijuana. In this way they can produce 75 or more joints from a single ounce.

* * *

Q. Do you know anything about clove cigarettes that kids are smoking? My daughter (age 15) says she buys them at convenience stores and they are harmless.

A. They are not harmless at all. According to Judy Murphy of the U.S. Public Health Service's Office on Smoking and Health, tests at the Oak Ridge laboratories show that, like regular cigarettes, clove cigarettes produce carbon monoxide, are relatively high in tars and contain nicotine. They are about 60 percent tobacco and 40 percent cloves and therefore have the same health hazards as regular cigarettes plus the additional risk of a substance whose physiological effects have not been studied. They are also addictive which is a particular concern for teenagers.

In California where the problem appears to be widespread, clove cigarettes are being promoted as a "safe" alternative and even as a way to get high. The San Diego chapter of the American Lung Association says the illusion that clove cigarettes are capable of producing mood-altering effects is reinforced by the way they are marketed — in packs of 10 (at $1.50 to $3 per pack) or individually "to be passed around among friends during special occasions or just to make everyone feel good."

* * *

Sue Rusche, author and national authority on drug abuse, answers questions from readers in her column. Write to her in care of this newspaper.

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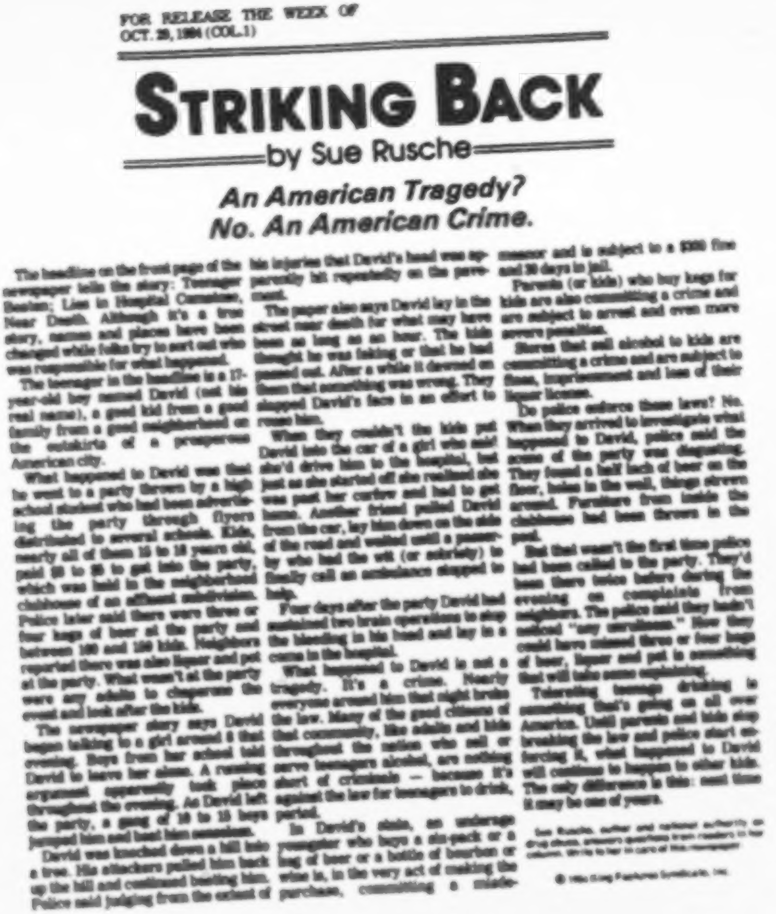

FOR RELEASE THE WEEK OF
OCT. 29, 1984 (COL.1)

STRIKING BACK

by Sue Rusche

An American Tragedy?
No. An American Crime.

The headline on the front page of the newspaper tells the story: Teenager Beaten; Lies in Hospital Comatose, Near Death. Although it's a true story, names and places have been changed while folks try to sort out who was responsible for what happened.

The teenager in the headline is a 17-year-old boy named David (not his real name), a good kid from a good family from a good neighborhood on the outskirts of a prosperous American city.

What happened to David was that he went to a party thrown by a high school student who had been advertising the party through flyers distributed to several schools. Kids, nearly all of them 15 to 18 years old, paid $3 to $5 to get into the party, which was held in the neighborhood clubhouse of an affluent subdivision. Police later said there were three or four kegs of beer at the party and between 100 and 150 kids. Neighbors reported there was also liquor and pot at the party. What wasn't at the party were any adults to chaperone the event and look after the kids.

The newspaper story says David began talking to a girl around 8 that evening. Boys from her school told David to leave her alone. A running argument apparently took place throughout the evening. As David left the party, a gang of 10 to 15 boys jumped him and beat him senseless.

David was knocked down a hill into a tree. His attackers pulled him back up the hill and continued beating him. Police said judging from the extent of his injuries that David's head was apparently hit repeatedly on the pavement.

The paper also says David lay in the street near death for what may have been as long as an hour. The kids thought he was faking or that he had passed out. After a while it dawned on them that something was wrong. They slapped David's face in an effort to rouse him.

When they couldn't the kids put David into the car of a girl who said she'd drive him to the hospital, but just as she started off she realized she was past her curfew and had to get home. Another friend pulled David from the car, lay him down on the side of the road and waited until a passer-by who had the wit (or sobriety) to finally call an ambulance stopped to help.

Four days after the party David had sustained two brain operations to stop the bleeding in his head and lay in a coma in the hospital.

What happened to David is not a tragedy. It's a crime. Nearly everyone around him that night broke the law. Many of the good citizens of that community, like adults and kids throughout the nation who sell or serve teenagers alcohol, are nothing short of criminals — because it's against the law for teenagers to drink, period.

In David's state, an underage youngster who buys a six-pack or a keg of beer or a bottle of bourbon or wine is, in the very act of making the purchase, committing a misdemeanor and is subject to a $300 fine and 30 days in jail.

Parents (or kids) who buy kegs for kids are also committing a crime and are subject to arrest and even more severe penalties.

Stores that sell alcohol to kids are committing a crime and are subject to fines, imprisonment and loss of their liquor license.

Do police enforce these laws? No. When they arrived to investigate what happened to David, police said the scene of the party was disgusting. They found a half keg of beer on the floor, holes in the wall, things strewn around. Furniture from inside the clubhouse had been thrown in the pool.

But that wasn't the first time police had been called to the party. They'd been there twice before during the evening on complaints from neighbors. The police said they hadn't noticed "any weirdness." How they could have missed three or four kegs of beer, liquor and pot is something that will take some explaining.

Tolerating teenage drinking is something that's going on all over America. Until parents and kids stop breaking the law and police start enforcing it, what happened to David will continue to happen to other kids. The only difference is this: next time it may be one of yours.

Sue Rusche, author and national authority on drug abuse, answers questions from readers in her column. Write to her in care of this newspaper.

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FOR RELEASE THE WEEK OF
JANUARY 21, 1985 (Col.2)

STRIKING BACK

by Sue Rusche

Teens and Alcohol Use

Q. I think you're all wet in opposing the responsible use of alcohol for teenagers. No matter what we do, kids are going to drink. How much better it would be to teach them to drink responsibly than to impose upon them the outmoded morality of abstinence.

A. Abstinence for teenagers has nothing to do with morality and everything to do with the law. Right now in 47 states it's against the law for 13- to 18-year-olds to drink. By 1986 that will be extended to 19- and 20-year-olds in all states unless some choose to forego federal highway funds by refusing to pass a universal drinking age of 21.

That's where the drinking age was when I was growing up. True, as teenagers, some in my generation drank alcohol but in general, that drinking occurred only once in a while and in general, consumption was light. The pattern among today's teenagers is to drink every Friday and Saturday night (and sometimes during the week as well) and to consume one or more six-packs of beer, a bottle of wine, or several mixed drinks in one sitting.

Then, alcohol could be purchased most often only at state-owned and operated liquor stores that were few and far between, usually one per small town or city neighborhood. Now, beer and wine can be purchased everywhere, not only at package stores that are privately owned, but at grocery stores, drug stores, gas stations, convenience stores, and in some states, even in department stores.

When we were growing up most of us watched television a few hours a week. By the time today's youngsters graduate from high school, they'll have spent more time in front of the tube than they did in the class room. And a significant part of their viewing time is filled with advertising messages that link their ability to succeed in sports, in work, even in relationships with the consumption of alcohol.

Then teenage drinking was held in check by a healthy fear of getting caught and the "catchers" were angry parents who imposed sanctions within the family. Now all too often the first time youngsters get "caught" is when they face serious or devastating charges of driving under the influence, vehicular homocide, or manslaughter and when it is a judge rather than mom or dad who imposes the sanctions.

Research shows that drinking which begins in adolescence can lead to the rapid onset of alcoholism, the abuse of other drugs, and problems with addiction in adult life. Given the negative impact alcohol has on their health, and the fact that it is against the law for them to drink, I don't think there can be any such thing as "responsible" drinking for teenagers. It's interesting to me that this message seems to be coming primarily from the alcohol industry rather than from parents.

This industry is vast and includes not only manufacturers and distributors, but all the new kinds of places that sell alcohol as well. Given the intense pressure the industry places on youngsters to drink at the expense of their health and in spite of the trouble they may encounter with the law, I don't think kids have a chance unless we teach them what the law is and why we expect them to obey it.

I think that parents have the right to demand that the alcohol industry and local businesses and governments reinforce that position rather than try to undermine it with talk of responsible use for kids and lack of enforcement in a thinly disguised attempt to protect profits and tax revenues.

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Sue Rusche, author and national authority on drug abuse, answers questions from readers in her column. Write to her in care of this newspaper.

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FOR RELEASE THE WEEK OF
FEB. 11, 1985 (Col.1)

STRIKING BACK

by Sue Rusche

Alcohol, Teens and the Law

Q. Now that Congress has passed a bill to deny federal highway funds to states that refuse to raise their drinking age to 21, don't you think we'll begin to see a reduction in teenage alcoholism and drunk driving deaths?

A. Although I am very grateful for that bill and feel that it will help, I don't think we will see the substantial reductions all of us hope for until we learn to take the law seriously. In nearly every state alcohol is an illicit drug for teenagers 18 and under but we have virtually "decriminalized" the drinking age laws we have now by refusing to enforce them.

While the legal drinking age in all but three states is currently 19 or 20 or 21, in truth the drinking age is 16 or whatever other age it is that various states license teenagers to drive automobiles. A paradox of the '80s is that alcohol is an illicit drug for teenagers but drunk driving is their leading cause of death.

This virtual "decriminalization" of alcohol for teenagers has led to a horrifying escalation in regular alcohol use. Sixty-seven percent of seniors use alcohol regularly compared to 25 percent who use marijuana at the same rate. A second paradox of the '80s is that it is illegal for stores to sell alcohol to teenagers but stores sell alcohol to teenagers — all kinds of stores.

In my county alone some 800 establishments are licensed to sell alcohol. State law says a store that breaks the law by selling to minors will have its license suspended or revoked. In the past two years, police have made several cases against stores that sold alcohol to minors and have won convictions in every case. But not one license has been suspended or revoked. Moreover, police can only make cases against stores about which they receive a complaint and to which they must take an undercover teenager to test the law. A third paradox of the '80s is that state law prohibits alcohol sales to minors but local ordinances and administrative policies protect the stores rather than teenagers.

It is time we realize how much money the alcohol industry spends marketing an illicit drug to teenagers. Beer companies, for example, sponsor many community athletic events at which they provide free posters, T-shirts, and trophies that all sport the beer company's logo. Is the golden figure on top of the winner's trophy for runners aged 14 and under that of an athlete? No. It's a beer can!

Perhaps the most offensive marketing technique of the alcohol industry is its intrusion into the arena of developing alcohol education materials and programs for school age children. It should come as no surprise that such materials attempt to teach children how to drink "responsibly" even though it is against the law for them to buy or possess alcohol.

The pamphlet, "Let's Talk About Drinking" produced by the Wine and Spirits Wholesalers of America is just one example. Industry's widespread support of Students Against Driving Drunk (not against drinking, period, or against drinking and driving, but just driving drunk) is another.

What does all this say to youngsters? It says the drinking age law doesn't mean anything, doesn't apply to them, that they are somehow above it. A recent survey by the Insurance Institute of Highway Safety of 30,000 high school students in seven states shows just how far above the law teenagers think they are: half the boys and one-third of the girls who are licensed to drive said they had driven after drinking even though most of them could not purchase alcohol legally. What's more, half the boys who had held their driver's license for two or more years had already had at least one crash.

I think it's time we take the alcohol laws seriously. And I think it's time we teach teenagers about the legal risks they take when they break those laws. I'd like to prevent them from first learning about the law only after they've been caught and are experiencing consequences, in a court before a judge, in a hospital bed — or in their graves.

* * *

Sue Rusche, author and national authority on drug abuse, answers questions from readers in her column. Write to her in care of this newspaper.

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FOR RELEASE THE WEEK OF
FEB. 4, 1985 (Col.2)

STRIKING BACK

by Sue Rusche

Why Teach Teenagers About Alcohol Laws?

Q. Why are you so insistent that parents teach teenagers about the alcohol laws?

A. The film, "Just Another Friday Night" provides an eloquent answer to your question. (Readers can find out more about the film, produced by the American Automobile Association Foundation for Traffic Safety, by calling their local AAA.)

As the film opens, a lawyer is pleading the case of an 18-year-old boy charged with eight counts of manslaughter. A series of flashbacks shows you how the boy got there, stunned and disbelieving that the events of "just another Friday night" could lead to his standing before a judge facing the possibility of a lifetime prison sentence.

First the boy presented fake identification to a clerk in a liquor store and bought a six-pack of beer (misrepresentation of age; possession of alcohol by a minor).

Then he popped the top of a beer and began drinking it as he turned on the ignition of his pickup truck and drove off (violation of the open container law).

He continued drinking and driving throughout the afternoon and evening (driving under the influence.)

Then he piled eight friends into the rear of his pickup and headed for a party in the next town, accelerating to 70 mph (speeding).

Finally, too intoxicated to pay attention to his driving, he veered off the road, struck a tree and flipped over, killing all eight of his friends (reckless driving, losing control of a vehicle, eight counts of manslaughter).

Part of his tragedy is that this young man wasn't aware he had broken any law.

He didn't know it was against the law to misrepresent his age.

He didn't know it was against the law to possess alcohol when he was underage.

He didn't know it was against the law to drive with an open container in his truck.

He didn't know how much — or little — beer it took to raise his blood alcohol content beyond the legal level of intoxication.

He didn't know that it was against the law to speed.

He didn't know it was against the law to lose control of his truck.

He didn't know it was against the law to kill people in an accident ("it wasn't my fault").

He didn't know what a manslaughter charge is.

If anyone had taken the trouble to teach him, eight young people might be alive today and he would not be standing in court wondering what his fate will be.

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Sue Rusche, author and national authority on drug abuse, answers questions from readers in her column. Write to her in care of this newspaper.

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FOR RELEASE THE WEEK
OF APRIL 30, 1984 — (COL 1)

STRIKING BACK

by Sue Rusche

The 'Budweiser Spring Break '84'

Q. I have two sons in college. One attends the University of Georgia. The other is a student at Georgia Tech. The enclosed pamphlet, "Budweiser Spring Break '84," was inserted into both their college newspapers just before spring vacation. I want to know two things: how many other university newspapers carried the Budweiser insert and what do you think of it?

A. A spokesman for Anheuser-Busch told me the pamphlet was inserted into the student newspapers of about 70 major universities in the Northeast, Midwest and Southeastern United States, as well as a few schools in the Southwest where students vacation on Texas beaches. After talking with the spokesman, I think Anheuser-Busch is making a sincere effort to support responsible drinking among college students. Judging from the pamphlet itself, it seems the company is making just as sincere an effort to sell a lot of Bud to students.

In cooperation with the Indiana and Georgia Departments of Tourism, Anheuser-Busch set up three "Pit Stops" in those states on interstate freeways leading to Florida beaches. Pages 10 and 11 in "Spring Break '84" encourage students to stop at the "Pit Stops" for free coffee, donuts, highway safety tips, and information on touring sights and spring break activities. This section also offers students a list of do's and don'ts as they drive to Florida for spring break: don't exceed speed limits; do bring flashlights and flares in case of road emergencies; don't drink and drive; do check gas, oil and water at every stop; don't litter. An article on page 2 of the pamphlet warns students that the drinking age in Florida and Texas is 19 and should be obeyed.

With responsible use out of the way, Anheuser-Busch gets down to the business of selling beer to students. The cover of the 16-page, 4-color pamphlet, for example, shows a vigorous, healthy young man riding the crest of a wave, not on a surf board but on a Budweiser beer bottle. "This guide is brought to you by Budweiser, the King of Beers," it says inside. "For years BUD has been a part of the Spring Break tradition — this year being no exception... From free concerts, to can-redemption centers, to fun and games, this Spring Break's for you. From Budweiser. So wherever you go, whenever you get there, look for BUD. For a little extra Spring Break pleasure."

The rest of the pamphlet describes a number of Spring Break treats Budweiser has prepared for students: the "1st Annual BUD Video Center," the "BUD Varsity Video Team," the "Budweiser Win a Street Coupe Sweepstakes," the "BUD Glee Club," "Free Budweiser Spring Break '84 (Rock) Concerts" at various Florida and Texas beaches, and the "BUD Spring Break Hot Line (1-800-345-ROCK) for Up-To-Date Concert Information."

The "Budweiser Welcome Centers" are described in detail on pages 14 and 15: "Lookin' for BUD in all the Right Places. Every year, Budweiser helps keep the Spring Break tradition alive by sponsoring special events for you, and your fellow students. So look around, you'll find BUD in places like these." The pamphlet tells where the Budweiser Welcome Centers are located (Ft. Lauderdale, Daytona, Ft. Walton Beach and South Padre Island, Texas) and what they feature: "Free World-Class Concerts," "Class Photos," "games, prizes, fun," "Budweiser Action Updates" on Daytona's "I-100 FM Radio," and the "Can-Exchange — Cash in your Budweiser empties in exchange for valuable BUD memorabilia," among others.

A two-page spread from the "BUD Book Store" offers such mail-order "Student Body Necessities" as "University of Budweiser" T-shirts, U of B sweatshirts, U of B satin award jackets, U of B jerseys, U of B caps, U of B flags, U of B roadster hats, U of B thermos steins, and the BUD Beach Towel. There's even a "U of B 10K gold" class ring with an "encrusted synthetic ruby setting" ($285 man's ring, $175 woman's ring) which the "University of Budweiser proudly offers... to its prestigious student body."

There has been a lot written lately about the alcohol industry focusing its sales efforts on young people in order to establish lifetime brand loyalities. The fact that Anheuser-Busch would spend enough money to place this brochure in 70 university newspapers across the country seems to underscore this point.

Considering that the leading cause of death among college students is accidents, suicides and homicides, most of them drug or alcohol-related, Anheuser-Busch might better spend its money confining its responsible use message to adults and teaching college students not to drink at all. After all, a dead student can't look for Bud in any of the right places.

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Sue Rusche, author and national authority on drug abuse, answers questions from readers in her column. Write to her in care of this newspaper.

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FROM KING FEATURES, 235 EAST
45TH ST., NEW YORK, 10017
FOR RELEASE THE WEEK OF
DEC. 24, 1984 (Col.2)

STRIKING BACK

by Sue Rusche

Responsible Drinking for Teenagers?

BY SUE RUSCHE

An open letter to the Wine and Spirits Wholesalers of America:

The press release you sent me describing your efforts to help with the problem of teenage drinking by advising parents to teach kids to drink responsibly raises this question: Who do you think you're fooling?

You say, "During the holiday season, teenagers will be confronted with numerous opportunities to drink. They need to know how to make responsible decisions about the use, non-use, and misuse of alcohol."

Why? In every state but three, it is illegal for all teenagers aged 13, 14, 15, 16, 17, and 18 to drink any wine or spirits at all. How can any of these kids make a "responsible" decision to "use" alcohol when "non-use" is the only legal decision available to them?

While I applaud your efforts to promote responsible drinking among adults, for whom it is legal to drink, I deplore your efforts to promote responsible drinking among teenagers, for whom it is not legal.

The 20-page pamphlet you have prepared for nationwide distribution over the holidays is a disgrace. Called "Let's Talk About Drinking: A Guide for Families," the pamphlet ignores the legal issue, doesn't even acknowledge that it's against the law for kids to drink.

You tell parents to "be a good listener even when you may not agree." You tell kids "when you talk with parents about sensitive subjects like sex or drinking, you must remember that they are not always aware of your point of view... Parents are often torn by the desire to protect and control teenagers. Parents realize that some of these controls should be relaxed, but which ones and how fast to let go is often on the forefront of a parent's mind... understand that both you and your parents have a right to your opinions. This is not the time to reject someone's opinions or concerns."

Youngsters will tell you that, law or no law, kids are going to drink. What are we as parents supposed to do with this opinion? Your pamphlet would have us accept it, give in to it, teach youngsters to ignore the law and drink "responsibly."

But parents have more options, to say nothing of responsibilities, than to passively accept all opinions kids express. While we can't change their opinions, we have an obligation to teach them the consequences of each one they hold. And if we don't teach them about consequences, sooner or later society will, but the lesson will be much harsher, much more severe.

Youngsters who choose to drink need to know they are also choosing to break the law. They need to know what the legal consequences are when they make such a choice. In most states an underage youngster who buys alcohol can be arrested and charged with a misdemeanor. He must go to court and appear before a judge. He may be fined, put on probation, or sent to jail. If he is old enough to drive and breaks a second law by combining drinking with driving, the list of consequences grows longer and more severe.

The drinking age law is there to protect teenagers' health and safety. In his book, "Getting Tough on the Gateway Drugs," Dr. Robert DuPont cites evidence that shows the longer teenagers postpone the use of alcohol, the less likely they are to become involved with any other illicit drug. Additional research shows they are also less likely to face any problem of addiction in their adult lives.

I think your pamphlet is disgraceful because it ignores this. I think it's disgraceful because it attacks parental responsibility, implying that parents who set firm limits fail to communicate with their children. I think it's disgraceful because it invites parental failure, reinforcing those who are reluctant or afraid to set limits or to insist that kids obey the law. Most of all I think it's disgraceful because it reinforces teenagers' sense of invulnerability (nothing bad will ever happen to me), plays to their desperate need to be grown-up (see, Mom, teenagers can be responsible), and encourages them to think the law doesn't apply to them.

Toward the end of your pamphlet is this advice: "For young and old, the same basic principle applies: If you choose to drink, drink responsibly." My profound holiday wish for all readers of this column is that they take your advice about as seriously as you take the law.

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FOR RELEASE THE WEEK OF
APRIL 1, 1985 (Col.2)

STRIKING BACK

by Sue Rusche

When Minors Try to Buy Alcohol

Q. I have some comments about a column you wrote on alcohol sales to minors that I would like to share with you from a retailer's point of view.

You say that stores sell alcohol to minors but you don't say anything about minors producing false identification. In this age of technology fake I.D.'s are easily obtained, even from advertisements in magazines.

A liquor store employee in a busy atmosphere has to make an important judgment with potentially far-reaching complications in a matter of moments. Management tries to train employees about liquor licensing laws and about how to spot fake I.D.'s but even an expert sometimes makes mistakes.

In my years of experience at the retail level I have seen fake military, college and drivers' license identification. The minor figures "why not?" — there isn't anything a retailer can do to a minor attempting to purchase an alcoholic beverage. In other words he has nothing to lose. On the other hand, the retailer is guilty of a criminal offense and could lose his liquor license if he should make the mistake of selling to a minor, even if the minor produced an identification that the most prudent employee accepted.

A. You are assuming all the stores that sell alcohol to minors ask for identification. The ones in my county to which I referred do not. In fact, all were convicted of the specific charge of "failure to ask for I.D." In our state, the charge of "knowingly selling to a minor" is much more difficult to prove in court because of that word, "knowingly."

I am not trying to make excuses for teenagers who use fake I.D.'s to purchase alcohol illegally. They may think they have nothing to lose, but they are just as guilty of a criminal offense as the retailer who knowingly sells alcohol to them and, in my opinion, like anyone else who breaks the law, they should be fully prosecuted.

However, liquor stores do not need to be helpless victims of fake-I.D.-card-carrying teenagers. First, the law doesn't hold you responsible for selling to a minor who uses false identification. In that case, it's the minor who is breaking the law, not you. Second, you can take the same measures to protect yourself that you take when you accept a customer's check as payment. Most retailers ask for a driver's license and two credit cards to verify the customer's identity. Few minors can produce credit cards with their own names on them.

Third, there are many other things you can do if you even suspect a customer is underage:

1. Ask what he (or she) does for a living. If the answer is "attend school," ask where. If your customer blurts out the name of a high school you've got him. If he names a college, ask for his student I.D.

2. Ask for his phone number and tell him you're going to check by calling his parents to verify his age.

3. If they're not home give him an envelope and ask him to address it "to the parents of" the name and address shown on his driver's license. (If he says he's a college student ask him to address it to the dean). Tell him you're going to send a letter to his parents (or the dean) letting them know that on such and such a date their son (or daughter) presented to you proof of legal age and purchased so many dollar's worth of beer, wine or liquor.

4. If your customer backs down at any point and admits he is underage, call the police and press charges against him.

I guarantee you if you do this two or three times, you won't have the problem any more.

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FOR RELEASE THE WEEK OF
APRIL 8, 1985 (Col.2)

STRIKING BACK

by Sue Rusche

Liquor Store Owner's Plan for Minors

Q. As a liquor store owner I was infuriated with your column that implies liquor stores sell alcohol to minors intentionally. It's just not true, although there probably are a few stores that do.

I know for a fact that many retailers, including myself, purchase high school year books to help keep tabs on kids who may try to purchase illegally. In smaller communities such as ours we personally know many of the kids. We do not sell to minors intentionally.

In my opinion state and local alcohol regulatory agencies are creating part of the problem. They have over-licensed some communities and have issued licenses to some individuals who should never have been licensed to begin with. They have issued licenses to grocery stores, drug stores, and others who do not need the revenue from the sale of alcoholic beverages and who use them as loss leaders to attract customers to their stores. The independent liquor dealer cannot compete with these stores in price because alcohol is his main source of income rather than a sideline.

If such stores do get caught selling alcohol to a minor and their alcohol license is suspended or revoked as a result, they do not have to close down their entire store. This means they don't have as much to lose as the independent dealer who must close his store entirely if he loses his license.

Such stores also tend to have more employees and more varied working hours than liquor stores have. Why should an employee care about asking for an I.D. when he or she will most likely not be charged with the crime? These stores are generally busier than liquor stores and it is sometimes easier for an employee to keep the checkout lines moving rather than stop to check for identification.

I feel the independent liquor dealer is much more concerned about this problem because he cannot afford to have his doors closed and think the following suggestions would help curb the problem of sales to minors:

1. Alcoholic beverages should be sold only in independent liquor stores. The number of licenses should be limited to the needs of the community and the number of stores it can support.

2. Stores which abuse their alcohol licenses should be prosecuted more vigorously.

3. People who buy alcohol for minors should be prosecuted more vigorously.

4. Minors who attempt to purchase alcohol with fake or altered I.D.'s should be prosecuted more vigorously.

5. Adults who see alcohol being sold to minors should alert the owner to see if he knows his customer is underage. If they get no results they should contact the police.

I had to write this letter in defense of the vast majority of liquor dealers who do not abuse their licenses.

A. Hooray for you! If more alcohol retailers were like you there wouldn't be any sales to minors. You've put your finger right on the problem: too many licenses and not enough enforcement. And until folks get mad enough to demand fewer licenses and more enforcement, irresponsible alcohol retailers will continue to give the entire industry a bad name.

You want the same thing parents want: to put an end to illegal alcohol sales to minors. Why not gather together other retailers who feel the same way and team up with your state network of parent groups working to prevent drug and alcohol use among teenagers?

Your network is called Parents in Action in Nebraska, (3014 Cedarberry Road, North Platte, Neb. 69101, 308-532-7557). Retailers in other states who would like to do the same may write to me in care of this newspaper for the name and address of your state parent group network.

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FOR RELEASE THE WEEK OF
OCT. 8, 1984 (COL.1)

STRIKING BACK

by Sue Rusche

An Alternative to the SADD Contract

Robert Anastas, founder and executive director of Students Against Driving Drunk (SADD) writes:

Q. I received a copy of the column you wrote about the SADD contract. I think that you have missed the point of SADD completely.

I am enclosing a statement on SADD and also our Contract for Life. You will note that we have taken out the words "too much" because we feel we do not want to give any impression that we condone the use of alcohol by teenagers. (In the formercontract a teenager agreed, among other things, to call his or her parents for a ride home "if I am ever in a situation where I have had 'too much' to drink.")

Please print my statement in its entirety plus both sides of the Contract for Life.

A. Your five-page statement is too long to print in this column but here's the revised contract:

"Teenager: I agree to call you for advice and-or transportation at any hour, from any place, if I am ever in a situation where I have been drinking or a friend or date who is driving me has been drinking.

"Parent: I agree to come and get you at any hour, any place, no questions asked and no argument at that time, or I will pay for a taxi to bring you home safely. I expect we would discuss this issue at a later time.

"I agree to seek safe, sober transportation home if I am ever in a situation where I have had too much to drink or a friend who is driving me has had too much to drink."

I am sorry you didn't see the first column I wrote about SADD because in it I said I supported all of SADD's goals: 1) to help eliminate the drunk driver and save lives, 2) to alert high school students of the dangers of drinking and driving, 3) to organize peer counseling programs to help students who may have concerns about alcohol.

I still support all of these goals. But, even though the revision helps, I still have trouble with the contract because a teenager cannot "find himself" in a situation where he's "been drinking" without breaking the law.

I'd like to propose an alternative "Contract for Life" for you to consider:

"Teenager: I agree to obey the law by not drinking any alcohol at all until I have reached the legal drinking age.

"When I reach that age I agree to never get behind the wheel of a car if I have had anything to drink.

"I also agree to call you for a ride home if a friend or date who is driving me has been drinking.

"Parent: I agree not to drink at all on the nights you go out so I will be able to give you a sober ride home if you ever need one. If I'm not home on such a night I will always give you a phone number where you can reach me.

"I agree to get your friend or date home safely, too, and help him or her pick up the car the next day.

"I also agree to never get behind the wheel of a car when I have been drinking or to ride in a car with a driver who has been drinking."

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Sue Rusche, author and national authority on drug abuse, answers questions from readers in her column. Write to her in care of this newspaper.

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FOR RELEASE THE WEEK OF APRIL 29, 1985) (COL 2)

STRIKING BACK

by Sue Rusche

Why We shouldn't Legalize Drugs

At least three syndicated columnists have recently called for the legalization of illicit drugs. If we legalize drugs, they say, we can control them and wipe out profits, crime, corruption and violence with the stroke of a pen.

Well, maybe. Few would deny that legalization would reduce profits. But could we control psychoactive drugs if we legalized them?

The answer may lie in how well we control the two legal psychoactive drugs we already have: alcohol — 100,000,000 drinkers, roughly 100,000 deaths per year; cigarettes — 60,000,000 smokers, nearly half a million deaths per year.

According to the National Council on Alcoholism the deaths break down like this: alcohol-related accidents and suicides, 60,000 deaths per year; cirrhosis, 30,000 deaths per year; alcoholism and alcohol psychoses, 5,000 deaths per year.

And like this for cigarettes, according to World Health Surveys of Bethesda, Maryland: smoking-related heart disease, 240,000 deaths per year; smoking-related cancers, 147,000 deaths per year; other respiratory disease, 61,000 deaths per year; other smoking-related deathss, 15,000 per year; smoking-related injuries such as fires, 4,000 deaths per year. In addition, an estimated 4,000 infants die each year from exposure to their mothers' smoking.

This means smoking kills more people each year than all those killed in World War I, World War II and Vietnam combined, says National Institute on Drug Abuse director William Pollin, M.D., writing in the Journal of the American Medical Association.

Another argument advanced for legalization is that taxes raised on newly legalized drugs could be spent on education and prevention. If education prevents abuse whey are 600,000 Americans dying every year from our two legal drugs? The answer may lie in who's doing the educating.

Through advertising, the alcohol and tobacco industries spend millions to divert our attention from all those deaths and focus it on how their products will improve our sex lives, strengthen our relationships with each other, reward us for a hard day's work and make us feel good about ourselves.

Additional millions are pumped into organizations like the Tobacco Institute to debunk scientific and medical research that shows their products kill us. Still more is spent setting up trade associations to lobby legislators, developing educational programs for school children that urge an end to drinking and driving but not an end to drinking by underage kids, and establishing political action committees (PACs) to elect political leaders.

The notion of designating drug taxes for education and prevention is a good one, but it will never happen. If it were feasible, we could point to examples of alcohol or cigarette taxes being used for such a purpose. We can't, because few, if any, exist.

The responsibility for educating people about the harmful effects of legal psychoactive drugs has traditionally fallen to government, always under pressure to represent all sides, and to nonprofit educational organizations which must obtain funding from contributions rather than profits and which are prohibited by tax laws from spending more than 20 percent of their income for lobbying. The result is an appalling inequity in the amount of money spent for education versus advertising, lobbying and political activity.

Until this changes, it's folly to think of legalizing any more psychoactive drugs. Unless, of course, we're ready for PCP commericials, Marijuana Institutes, Cocaine PACs, and heroin education programs for school children developed by poppy growers and opium processors.

* * *

Sue Rusche, author and national authority on drug abuse, answers questions from readers in her column. Write to her in care of this newspaper.

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'Striking Back' against a U.S. epidemic

Sue Rusche's twice-weekly column discusses the harmful effects of drugs and offers help to users and the parents of users

By David Astor

Sue Rusche was working as a graphics designer in the mid-1970s when three things happened that greatly disturbed residents of her Atlanta neighborhood.

One was the discovery that a group of 12- and 13-year-olds had been smoking pot at a birthday party. Another was the murder of an Emory University student who turned out to be a major drug dealer. And the third was the opening of five Emory-area "head shops" selling drug paraphernalia.

Rusche and other concerned Atlanta-area parents responded by getting together in 1977 to seek an ordinance prohibiting paraphernalia sales. The next year, Georgia passed such a law—and "Families in Action" had its first major success.

Thousands of FIA-like groups began springing up throughout the country, and became linked in 1980 under the umbrella of the National Federation of Parents for Drug-Free Youth. As the NFP name indicates, these groups wanted to do more than prohibit the sale of drug paraphernalia (although their efforts helped convince about 45 states to follow Georgia's lead in passing legislation). They wanted to fight drug abuse—and alcoholism and cigarette smoking as well.

One of the prime ways of doing this was to disseminate information on drugs and their ill effects—information that could counter, among other things, the notion that drugs can be used "responsibly." The Atlanta FIA, which became the information arm of the NFP, used a 1982 federal grant to start publishing *Drug Abuse Update*—a nonprofit quarterly publication containing abstracts of drug-related articles culled from medical journals, newspapers, and other sources. And Update editor and FIA executive director Rusche began writing "Striking Back."

Sue Rusche

The twice-weekly column—picked up by the *Los Angeles Times*, *Chicago Tribune*, and over 100 other papers since its February introduction by King Features Syndicate—answers a wide range of questions. Parents who discover that their children are using drugs ask what they should do. Others want to know the definitions of things like "bong" and "Acapulco Gold." Still others request information about the effects of various drugs. And others ask why alcohol and tobacco are legal when drugs aren't. Rusche said she often receives 100 letters a day, with the writers including parents, teenagers, grandparents, prisoners, and drug users.

The columnist tries to keep her answers lively while also offering numerous statistics—many of which she finds among the FIA's collection of over 200,000 documents. Her response last month to a question about cocaine, for instance, cited a study of 500 users that found 82% had chronic insomnia, 76% had chronic fatigue, 60% had severe headaches, 58% had nasal problems, 55% had poor or decreased sexual performance, 53% had attempted suicide, 45% had stolen money to buy cocaine, 40% had job or career problems related to use of the drug, etc. Rusche also gathers information by talking with physicians and her many other contacts.

A column answer—even one with a lot of statistics—can only provide much information. So Rusche also tells readers where they can get books and pamphlets on drug-related subjects, what toll-free "hotlines" to call, etc.

"Striking Back" focuses on the use of drugs by youths—whose changing adolescent bodies can be "so vulnerable" to these substances, said Rusche—the mother of two teenagers. But there are also plenty of older people using drugs (Americans of all ages spend over $90 *billion* a year on them), so the column is designed for adults as well.

The use of certain substances by U.S. youths is actually decreasing—and Rusche said the NFP and other drug-fighting groups have played a part in that. The National Institute on Drug Abuse reported, for instance, that 10.7% of high school seniors in the class of 1978 used marijuana every day—compared to 5.5% in 1983, while the number who used it in the past month dipped from 37% to 27% during that five-year span. But Rusche stated that this total is still too much, especially with the discovery of numerous potentially harmful chemicals in marijuana that can affect the lungs, reproductive organs, and other parts of the body. And she added that the use of certain types of drugs is still rising. All in all, Rusche said young Americans use drugs more heavily than 20 years ago—and more heavily than youths in any other country of the world.

Convincing youths to give up drugs is a primary aim of "Striking Back," but Rusche said she attempts to do this by providing information rather than telling people to stop. "It's not my business to tell people what they ought or ought not to do," she declared. "But I can tell them about the legal risks and the health risks."

Rusche also said she might add essay columns to "Striking Back" in order to address topics that don't fit into the current question-and-answer format. She would like to write, for instance, about why some of the assets of arrested drug dealers can't be directly used for drug prevention efforts.

"Prevention has never really been a sexy issue, but it's the most cost-productive thing you can do," said Rusche, noting that it means less money spent on treatment and law enforcement.

Born in Ohio, Rusche attended Miami University in that state for two years before finishing her degree at the Cincinnati Academy of Commercial Art. She went on to work for the Doyle Dane Bernbach ad agency, the Southern Regional Council (doing civil rights-related tasks), and Project Headstart (teaching art to youngsters in housing projects) before starting her own "Graphics People" design studio in 1972. Rusche began working full-time for FIA in 1978, and now spends about 60 hours a week fighting drug abuse.

In addition to editing FIA's quarterly journal and writing her syndicated column (Possie Raiford handles the "Striking Back" mail and business end), Rusche has published articles, appeared on tv shows such as *Today* and *Good Morning America*, and testified before various committees of the U.S. Congress.

"I live and breathe all this stuff, I'm here to tell you," Rusche declared.

Mr. **Wheat**. The bells that you have heard interrupting your testimony indicate that we are in the middle of a rollcall vote. But as we have a very limited amount of time left before we have to give up this room, Ms. Wenger, I will invite you to provide your testimony at this time.

Mr. Wolf, we have to be out of the room before 12 o'clock. And I am afraid if we don't continue that there will be no opportunity for the testimony. I am waiting to go vote until Mr. Coats comes back, to hear the testimony of Ms. Wenger.

Mr. **Wolf**. Excuse me. I have to go. I wanted to hear your testimony. I will be back, and I will take it with me and read it.

Mr. **Wheat**. We hope you will be back to ask questions of the panel.

STATEMENT OF SIS WENGER, ALCOHOL AND DRUG EDUCATION CONSULTANT, SOUTHEAST MICHIGAN SCHOOL DISTRICT, BIRMINGHAM, MI

Ms. **Wenger**. I have submitted my written testimony, and I hope you have a chance to read it, Mr. Wolf.

Thank you very much for inviting me to meet with you this morning. I know how short the time is, so I will try to briefly summarize my major points.

My work primarily is that of alcohol and drug education consultant to a number of major school systems in the southeastern Michigan area and in some areas outside the State of Michigan. I do extensive training programs for school professionals in the area of alcoholism and drug abuse and this impact on families. And finally, I manage a program that has trained over 150 volunteers who work with schools and community groups all over southeastern Michigan in providing fairly comprehensive alcohol and drug education in our school systems and to the public.

My primary concern today is to tell you what we have learned during the extensive work that we have done in southeastern Michigan. I was delighted to have the panelists on my immediate right talk about the student assistance programs regarding children of alcoholics. I would like to submit to you that the statistic of 3.3 million teenagers being in serious trouble or addicted today was interesting, but it pales in comparison to the number of children in our schools all across America who are in very serious trouble because of somebody else's alcohol or drug abuse, * * * the children of alcoholics, or other chemically dependent parents.

Most of the research would indicate that one out of every five or six children in every classroom in America lives in a home with an alcoholic mother or father other adult or older sibling. Those children suffer in silence, primarily. We don't identify them. We don't give them permission to reach out and ask for help unless we have a student assistance program as mentioned today, and by and large, they tend to be condemned to go through life in silence and then to repeat the pattern.

We have heard a lot about environment today. I would submit to this committee that the primary reasons for alcoholism are environmental and genetic, and that the young people in our country who are at the highest risk of becoming chemically dependent, of abusing any chemicals, are the children who are growing up in an alcoholic home, not only for environmental reasons, but also biological reasons. I am convinced that, until we specifically address this most high risk population in all of our prevention programs both educational and treatment, we will continue to have comprehensive education programs that fall very short of the intended goals.

I got into this work because I was evaluating a number of community programs in southeastern Michigan that relate to what we called child advocacy issues in the middle 1970's. The first program was in the county courts dealing with juvenile delinquency prevention. The courts had determined through their own study that most of the children who land in the juvenile justice system are children who have been through a traumatic divorce situation in their family. What they did not ask was what caused the trauma in the family which led to the divorce? When we did the research on those programs, almost 100 percent of the young people identified as high risk for juvenile delinquency had alcoholic parents.

I was working in another program on abuse and neglect, and found that the professionals in the field were saying that abuse and neglect tends to run in families, but what they didn't ask were the questions that will show us that alcoholism very often runs in families parallel with the abuse and neglect.

I was very, very disappointed when I read the final report, of the Attorney General's task force on domestic violence, in September, and found in 155 pages only two references to alcohol abuse. Almost every recommendation for procedural and policy changes in that report could have an added phrase about questions to be asked at times that the law enforcement people are called out for domestic violence offenses and at times of prosecution for such offenses.

You had before your committee a juvenile judge from northwestern Ohio, at your last meeting, who suggested mandating treatment for young people who are involved in alcohol or drug abuse, criminal activity. I would submit that we need to find ways in our juvenile justice system to mandate treatment for the parents of these kids when they are alcohol/drug abusers. We should ask questions such as: Is there alcoholism in this family? What else is going on with this kid?

Tragically, every week I have a whole new set of examples which could fit the point I am trying to make. The stories are all the same, the names just change. Last week I learned about a boy named Greg who is in one of our training schools. He is incarcerated at the moment because he broke his stepfather's leg. Assault and battery was the charge for which he was convicted. His stepfather is an alcoholic who was sexually abusing his sister. His stepfather left the State to avoid prosecution; his sister is in a foster home, and Greg is incarcerated. Greg has a long history of running into trouble in schools primarily, and now with the law. And all of the things in his record point to his reacting to his extraordinary frustration and pain because of his alcoholic stepfather's cruel, drinking-related behavior.

And so, basically, what we are doing in Michigan and what we are doing all across this country, I believe, is we are building prisons to house our Gregs, instead of establishing programs that train adults who work with young children to recognize those children who are suffering from chemical dependency in the family so they can help those children to deal with that problem so they are less likely to become criminals and to repeat the pattern of addiction, violence, and crime.

Dr. Ian McDonald also testified, at your last meeting, about the number of divorces that are alcohol related. I would like to add that adults who once grew up in alcoholic families and who do not become alcoholics, who are not alcohol abusers, are also very overrepresented in our divorce courts, and this is related to the issues of trust, of not having appropriate social and emotional development and support in their childhood years.

In our work we train school professionals in the broad ramifications of the disease of alcoholism and other chemical dependencies, and we teach them about the roles that have been articulated to you by the young lady on my right, and we teach them about appropriate responses for teachers and counselors and administrators to children who are acting out in those roles. And what we are getting from hundreds and hundreds of school professionals is, a sense of relief that, finally somebody is making sense in all this. And I would submit to you that any programs which you can support which to assist in educating the adults who establish policy and procedures that impact on our children and which train those adults in a clear understanding of the disease of addiction and what happens to children who live in a diseased family, then, and only then, will we begin to see prevention of juvenile delinquency then, and only then, will we begin real prevention of spouse abuse, child abuse, sexual abuse; then, and only then, will we begin to have real prevention of alcohol abuse.

All of these other educational programs, spotty here and spotty there, are helpful, they are part of the whole picture however, until we take a look at the children who end up in all of our systems at enormous economical and human cost, until we understand that this disease is genetic as well as environmental and that anyone who has it should be free to get help for it, and that children who live with it should be given permission to ask for that help until then, I believe we will have no genuine prevention at all.

I would like to close my comments with a quote that I heard sometime ago at a conference, by Abigail Healy, who has been in recent years the Alcohol Issues Liaison in the White House. She said, "children of alcoholics feel like a chalk mark on a blackboard and all the adults around them have erasers." I would submit to you that what we are doing in southeastern Michigan and what we are seeing happening in communities all across this country where we have put in the kind of educational programs that I am talking about, is a change where these children who have felt so totally powerless over their position in life are being given permission to ask for help, adults are teaching them enough about the disease of alcoholism to name what it is they live with. I hope that you help in the educational effort that can make a difference. Thank you.

Mrs. BOGGS. Thank you very much.

[Prepared statement of Sis Wenger follows:]

PREPARED STATEMENT OF SIS WENGER, ALCOHOL/DRUG EDUCATION CONSULTANT, AND COMMUNITY EDUCATION COORDINATOR, HENRY FORD HOSPITAL MAPLEGROVE, BIRMINGHAM, MICHIGAN

Thank you for the invitation to address you this morning. I am grateful for this opportunity to share with you some of the insights I have gained in the past eight years as I have worked with school professionals in developing programs related to alcohol and other drug abuse, its impact on families and appropriate school system responses to it.

I work in the area of alcohol/drug abuse prevention on three fronts: (1) as a consultant to school systems in the development of prevention programs; (2) as a professional educator running workshops and seminars for administrators, counselors and other school professionals; and (3) as the manager of a community education program jointly sponsored by Henry Ford Hospital, its residential chemical dependency treatment center MAPLEGROVE, and by the Junior League of Birmingham, Michigan.

Since 1981, this latter program has reached over 70,000 people through community education presentations given by trained volunteers on a wide variety of alcohol/drug related topics. Volunteers receive an extensive education over a six-month period and then present between 25 and 60 individual programs per week throughout the greater Detroit area as a public service. They reach teachers, students beginning in Grade one, parents and community groups. Their work has resulted in an increasing demand for more information and in hundreds of families getting assistance for their pain. Last week, the Junior League of Detroit voted to add its volunteer and financial backing to this program, and we expect that the number of programs per week and people reached will escalate accordingly.

Why am I committed to teaching about alcoholism and about children who are growing up in families affected by it? In the mid-seventies, I was involved with the Junior League of Birmingham, Michigan, in several community projects which had been designed, in cooperation with area courts and agencies, as juvenile delinquency prevention programs and child abuse and neglect prevention programs. What became increasingly apparent was that alcoholism was clearly in the background of most of the clients being served through all of these "prevention" programs. Equally clear was the fact that alcoholism was not seen as a primary cause or precipitating factor in these serious family, judicial and societal problems, but rather as a related issue at best or, more commonly, as an additional result of the stresses which appeared to cause the abuse, neglect and/or delinquency.

Intelligent, well-educated and caring professionals in all of these programs were often making inappropriate decisions and designing ineffective policies and procedures because they did not understand the nature of addiction and its impact on children. I believed then -- and am more convinced now -- that, until there is widespread understanding of this disease and its devastating effect on families, schools and communities, uninformed and inappropriate decisions will continue to be made in our criminal justice system, our family relations courts, our medical facilities and our educational systems.

I believe that we must dispel the myths and defuse the stigma that continue to attach so doggedly to this perfectly blameless disease. Only then will we be able to effect attitudinal and behaviorial changes in the adults who have power and influence over our children so that those at highest risk -- both genetically and environmentally -- of becoming abusers of alcohol and other drugs are helped to understand their reality and given permission to ask for help. Every week, I am reinforced in that conviction; let me cite a few recent examples:

- Greg, age 16, is in a Detroit-area training school for assault and battery. Greg broke his alcoholic step-father's leg in a rage over the step-father's sexual abuse of Greg's younger sister. The step-father left the state and was followed by Greg's mother who is co-dependent as a result of her husband's alcoholism. Greg's sister was placed in a foster home. No one in the family is being treated for the family's primary problem -- alcoholism. Greg's life, however, has been consistent: he has been beaten, punished, prosecuted and incarcerated for what he has done to fight back against his alcoholic stepfather's cruel drinking-related behavior. The adults in the systems which have touched Greg's life have followed procedures; but, because those adults did not understand the nature of addiction, the many opportunities to intervene in Greg's life throughout his earlier years were missed, and he has never received the help he needed. (Over sixty percent of the boys in Greg's hall at the training school have at least one alcoholic parent.) We are building more prisons in Michigan to accomodate our Gregs.

- Teddy is five years old; he has visible scars from the beatings he has received from his marijuana-addicted father. Last week, Protective Services investigated Teddy's lot. The mother is not present as a result of her addiction to other drugs and an impending divorce. She also found that Teddy is groggy until late morning in Kindergarten because he is inhaling the marijuana smoke from his father and his friends well into the night. Teddy was relieved when he was removed from his home and placed with a grandmother whom he loves and trusts. The next day, Teddy's father promised the worker that he would stop smoking pot and beating his son, so she returned Teddy to his father and asked the teacher to call if Teddy comes to school bearing evidence of any further abuse. All of the systems worked according to established procedures. Yet, Teddy is afraid to go home, and one of my colleagues is teaching him how to dial the police. The Protective Services worker cares about Teddy and wants to believe his father, but she doesn't understand the nature of addiction. Teddy has learned at age five that he can't trust the adults in his life to keep him safe.

- Jenny, age 12, lives in a beautiful neighborhood; a few years ago, the courts awarded custody of Jenny to her alcoholic mother, whose drinking was not an official issue in the divorce proceedings. Jenny's mother works and drinks; often, she does not come home until the middle of the night. When she's sober, she's a lovely lady. Jenny confided in a neighbor, who contacted the school in an effort to bring additional support to Jenny. The concerned but uneducated principal confronted Jenny and her mother about the report. Jenny is now forbidden to contact the neighbor, who is the only person who has tried to give her some validation and support. She sits alone many nights, waiting and praying that her mother arrives unharmed, because a principal doesn't understand the disease of addiction and, therefore, couldn't understand that Jenny's first allegiance was to her mother whom she loves despite her disease.

I believe that there will be no genuine prevention of juvenile delinquency, child abuse, neglect, sexual abuse and other forms of family violence until the powerful alcohol/drug abuse connection -- especially the parental alcoholism connection -- to these major family and societal problems is acknowledged and addressed in prevention programs. Further, I believe that prevention of alcohol abuse (and its shadow, the disease of addiction) will remain an illusion until we deal with it in the context of the family system and understand that primary prevention means intervention as early as possible, with education and support, for children who live in homes with a chemically dependent parent, other adult, or older sibling.

Estimates vary, but at least one of every five or six students in every classroom in America lives in a home with an alcoholic (or other drug-addicted) parent. These children usually "look good" to the outside world and, consequently, seldom get their confusing -- often nightmarish -- reality validated and almost never get help for their deep emotional pain. Only about 15 - 20% of them will surface in the school setting as an "acting-out" child; in their cases, the usual result will be that the behavior will be addressed, the real problem -- alcoholism -- will go unacknowledged, the pain will continue, and they will begin to show up in our juvenile justice system and traffic courts.

The majority of children from families affected by chemical dependency will do what these children have done for generations -- keep their fear, pain and emotional isolation to themselves. They will not even share it with their non-alcoholic parent or other siblings. Often, they do not know that alcoholism/chemical dependency is the name of what is happening in their homes because they have not been given accurate, age-appropriate information about this disease. They don't know that there are millions of children just like them and that they have a right to talk about what is happening to them and to ask for help. Let me give you one last recent illustration:

- Last month, a middle school counselor in one of my workshops told me about Susan. Susan is 11 years old and is showing signs of emotional and social immaturity. Her academic work has been slipping for the past two years, and her mother had come in to discuss the possibility of holding her back. Susan is generally a quiet, cooperative student, seldom drawing attention to herself. Because of what the counselor was learning about family alcoholism in the workshop and the increased risks for abuse and incest faced by these families, she asked different questions than had been asked in the past. When Susan blurted out "I hate my father!", the counselor was able to help her to talk. Today, Susan and her parents are receiving therapy for the alcoholism in their family, and Susan is getting help for the devastating trauma she has suffered as the victim of incest at the hands of her alcoholic father. We know that -- when incest victims first reach out tentatively for help -- if the cry for help is not heard, they will generally not ask again for at least five to seven years. Because the school counselor did understand about the nature of addiction, she has saved Susan at least five to seven years of humiliation, shame and powerlessness; she may also have saved her from being driven into alcohol or other drug abuse to escape her pain and from depression and/or suicide later in life.

Dr. Claudia Black, this nation's most widely respected expert on children of alcoholics, has found in her research that mothers in alcoholic homes are four times more likely to be violent and fathers ten times more likely than other parents. Sibling abuse is twice as likely in children of alcoholics as in the general population. When the teenager is the chemically dependent person in the family, teen-to-parent abuse and sibling abuse rises dramatically.

L.J. West, MD, reporting in the ANNALS OF INTERNAL MEDICINE, 1984, stated that two thirds of all incidents of domestic violence are found to be related tp alcohol. Dr. Black and Dr. West's findings correlate with similar statistics when the right questions are asked. Yet, the final report of the Attorney General's Task Force on FAMILY VIOLENCE, published in September, 1984, mentions alcohol only twice in its 155 pages. The report's preface states that "the problem of family violence is a very human one, and it is amenable to human solution." The problem of family alcoholism is also a very human one. Family violence is too often related to family alcoholism, and the relationship is tragically ignored in some of our most important research. The results are predictable: policies and procedures are established which ignore a principal precipitant in many domestic violence cases, the disease of alcoholism. The disease goes unaddressed, and the families continue to suffer.

Dr. Ian MacDonald, ADAMHA Administrator, testified before this committee in March that "the rate of separation and divorce among alcoholics is seven times that of the general population; and two out of five domestic relations court cases involve alcohol." It is also important to note that adults who once grew up in an alcoholic home and do not become alcoholic are still over-represented in our divorce courts because they have often been emotionally deprived by not receiving love in their childhood and, consequently, did not learn how to give it. Additionally, they learned not to trust as children and not to express their feelings. Carried into adulthood and marriage, these deficits in establishing healthy relationships are devastating.

We know instinctively that all children deserve to have a secure and nurturing home, free from the stresses that can inhibit their growth and development. We also know that the children who grow up in alcoholic homes are deprived of the emotional security and nurturing they need, at the very least. Many are also not physically secure. These children are at highest risk of becoming chemical abusers and chemically dependent themselves -- for heriditary and environmental reasons -- and are over-represented in pediatrician offices with stress-related disorders and in run-away shelters across the country. They develop a very high tolerance for inappropriate, often bizarre, behavior, which makes them most likely to marry another person who grew up in a similar home and, therefore, most likely to marry a person who becomes chemically dependent. They live in a world filled with broken promises, dishonesty, unpredictability, blaming and shame. Most of them develop sophisticated survival skills in order to endure.

Until decision and policy makers in the systems which affect the lives of children clearly understand the nature of addiction and its impact on families, we will not be doing genuine prevention work -- in the area of alcohol and other drug abuse, *or* in delinquency, child and spouse abuse, incest and divorce.

What have we learned in the Detroit area about prevention, and what have other school systems and communities around the country learned? We have learned that:

- Education about alcohol and other drugs must begin with the adults who have power and influence over children, and that such education must include (1) a thorough understanding of the disease of addiction, how to teach about it so that children living with it feel they are being given permission to label their reality for what it is and to ask for help; and (2) how to recognize young people who are abusers of alcohol and other drugs and assist them and their parents to get the help they need;

- School systems must have student assistance programs to which the child from an alcoholic family can be referred for guidance and support, and where students in trouble because of their own use can get help. We know that these programs should include support groups beginning in early elementary school;
- Accurate, age-appropriate information on the disease of addiction, its family dynamics and its early warning signs should be given to children beginning in the early grades so that, when applicable, they can name what they live with and learn that they are not to blame and have resources available to them to help them cope. We have spent millions of dollars in determining the early warning signs of cancer and other fatal diseases and in educational programs to interrupt and prevent these diseases. I believe we should do no less for for this fatal disease;
- Excellent educational materials have been developed and made available to schools -- many with the assistance of NIAAA-- and that results are still questionable when one reviews the evaluation literature, even when these materials have been accompanied by quality technical training for teachers in the use of the materials;
- Adults who have not been prepared emotionally to respond to children who surface during alcohol education classes with information about their home life will often become emotionally paralyzed and unable to give these children the direction or support they need.

We are increasingly convinced that, in order to have genuine prevention programs, we must change the way in which systems relate to children by providing them with loving responses to their pain and education and support at the youngest possible age.

What I am espousing is long-term attitudinal and systems changes with outcome measurements that will be different from the commonly stated short-term goal of reducing alcohol/drug use by teenagers in a specified number of years. I believe that real prevention does not entail "quick fixes" and will not be effected by piece-meal educational programs which exist separate from the context of family life and family chemical dependency. Real prevention will involve ongoing education and intervention, from the top down, in any system which hopes to make a difference.

I once heard Abigail J. Healy, who has worked in recent years as the Alcohol Issues Liaison in the White House Drug Abuse Policy Office, say that "children of alcoholics feel like a chalk mark on a black board and that all the adults around them have erasers." In the greater Detroit area, we are working on changing the educational systems so that some of those erasers will disappear, and thousands of children will learn that they can hold the chalk that will write their own script for their life by talking about their pain and asking for help.

We hope to begin having the same impact soon on the judicial system and in the social welfare system. Community Interventions of Minneapolis has worked in many other communities to start the same process of intervention to prevention. I have a dream that the process will roll across this country ---- and that you will help.

Thank you.

Mrs. BOGGS. We are very pleased to have all of you with us. I hope that you will excuse me for having had to leave the hearing for a while. We are in the writing up of a bill, we call it the markup of a bill. And my vote was needed on one or two occasions, I had to leave. I apologize very much.

But I have read the testimony, and all of us will benefit from your appearance here very much today.

So, I am going to ask Mr. Coats if he has some questions.

Mr. COATS. Mayor Duvall, I appreciated your testimony on what you are undertaking in your community and the scope of that effort. I think that leadership from the top is very important in that kind of an effort. I wanted to compliment you for undertaking what you have and being open to whatever other further programs might help. I think that is very commendable.

Sue, because of our vote, I wasn't able to stay to hear all of your testimony, but I have read your testimony. What you say is disturbing in terms of the attitudes of those marketing alcoholic products and those advertising alcoholic products. With the increased emphasis on the effects of alcoholism, drinking and driving, drinking alone, the impact on teenagers, and the amount of—you know, this issue has kind of come to the front burner here lately. Have you noticed or seen any kind of a change in attitude or a change in policy on the part of the distributors, those marketing the product, the advertisers, or whatever?

Ms. RUSCHE. Yes. The answer to that question of course has to be "Yes." I think there is a sensitivity to it that wasn't there 5 or 6 years ago. But the thing I am so worried about is down at the local level how difficult it is to try to make any change. We have not succeeded at doing that at all in terms of trying to stop sales to minors. And it hasn't been because we haven't tried.

Mr. COATS. So you are saying that going hand in hand with a change in attitude at the national level, advertising level, promotional level, and so forth, has to go a much stricter enforcement, attitudinal-type change at the local level?

Ms. RUSCHE. Yes. Without it none of the laws make any difference. If we don't enforce them.

Mr. COATS. There is a film that a number of us here are sponsoring in high schools in our area, and it is going to be shown on a nationwide TV, called "One Too Many." Have you seen that film?

Ms. RUSCHE. No, I haven't seen that one.

Mr. COATS. You do critical reviews on a number of things, and I read some of your newspaper columns, which I thought were very good. I would appreciate, when you do see that film—it is going to be shown May 21 and if you wanted to see it earlier, I am sure our committee could arrange for you to do it—I would appreciate your critical review of that: how positive it is, what might be done, what the message is, whether it should be improved, whether this is on target, or whatever. So, if you could view that and perhaps meet with our committee—possibly view it before you leave today.

Ms. RUSCHE. I would be happy to, if I can do that.

Mr. COATS. I don't know what time your plane leaves, but I would hope that you could do that and give this committee your review of the film. That would be very much appreciated.

Now, given the shortness of time and the fact that there are other members here that I know might want to ask questions, I will pass; and then if we do have more time, I will come back.

Mrs. **Boggs**. Thank you very much, Mr. Coats.

Mr. Wolf.

Mr. **Wolf**. What percent, do you know, of the suicides deal with alcohol? The other witness said 30 percent of the suicides are alcohol related. Do you have any figures with you?

Ms. **Rusche**. I don't have a firm reading on that. I think perhaps this witness might. She spoke to it in her testimony I believe.

Mr. **Wolf**. You had it in your testimony.

Ms. **Kaplan**. Yes. I got it out of a book. It was a new book, in fact, entitled "Children of Alcoholism: A Survivor's Manual." I can't remember the name of the woman who wrote it, I am sorry. I can say, though, that it did say 30 percent. That was a quote from it. That was the only one I found.

Mr. **Wolf**. The second question, let me ask the both of you if I can. You seem to be saying to me—I quickly read yours and I heard part of what you said—that most of the programs that are put on by industry are really frauds. Is that what you were trying to say?

Ms. **Rusche**. No, I am not saying that. Because I sure haven't reviewed them all and I can't say that. I am saying that if we spend money to educate people about alcohol I think we have got to be very careful to look at what is being taught. And I think the industry, the Wine and Spirits Council at least—Wholesalers of America at least, put together a pamphlet saying "Let's Talk About Drinking. A Guide for Families," which they tried to distribute through the Congress just before Christmas, and the whole text of that and the whole underlying concept of that pamphlet was parents need to communicate better with their children, and the way to do that is to teach kids to drink responsibly. It never occurred to them that it is against the law for kids to purchase alcohol or to possess it, even now with the drinking age lower. And as we raise it to 21, I think we have all got to learn that, and pay more attention to that law and learn how to obey it, all of us together.

But when industry tells us that kids should drink responsibly, then my hackles go up, because it makes it sound as if industry is trying to continue to sell.

Mr. **Wolf**. That it is OK to drink, you can drink responsibly even if you are 13 or 14 or 15 or 16.

Ms. **Rusche**. Right. That is where it is happening, kids who are 13 and 14 and 15 and 16. I think the real legal drinking age in our country no matter what we say on paper as far as laws are concerned is 16 or whatever age it is that States license kids to drive. Because as soon as they get the car they are out from underneath parental control, and if they can go to the neighborhood grocery store, K-Mart, gasoline station, and liquor store within a block and buy whatever they want, and do it with impunity, we have a problem on our hands and we have got to deal with that.

Ms. **Wenger**. I would like to respond to two things. First to the suicide comment. What never seems to get into the statistics is the overrepresentation of suicides in our adult children of alcoholics population. The suicide rate for them is much higher than it is for the general population. People who never were intervened on when they were little children, which is the whole thrust of what I am saying. Early intervention is the beginning of prevention—prevention of child abuse, of incest, of divorce, of juvenile delinquency and of alcohol abuse. We will not be preventing many of our suicides until we deal with what happens to children when they grow up in such profoundly dysfunctional homes as those where there is chemical dependency.

Regarding the issue of the educational programs in our school systems, we heard a lot from the industry this morning about choice. I think that is what I am talking about, also; we need to give our children the kind of nurturing environment where they can grow up to make responsible choices about a whole lot of things, so that they can actually draw their own lines on the chalkboard and not have them controlled by others.

And I would submit that knowing what we know from psychology about cultural attitudes being fairly well locked in by age 10, that children who are watching television learn a whole lot about what is expected of them to be successful and to have a good time. I know a little boy who is 8 years old, whose older brother went to treatment. He asked his mom, "Does that mean that Matt can't ever again ever have another beer? That is terrible. That means he can't ever have fun again." This is in a home where beer is not drunk; it is only in the refrigerator for company. This little boy watches football and basketball games with his dad, which is how he learned about beer.

I would submit to you that such attitudes are not necessarily learned in the home; they sometimes are the result of environmental influences, including television advertising. When we are looking at this whole issue of television advertising, I hope that we remember the children 10 and younger who are strongly influenced by it.

The educational programs designed and implemented to date have not proven to be successful, by and large, in interrupting the use of alcohol or lowering the use of alcohol or other drugs by our teenagers. I am in the business of education, and that breaks my heart. But I believe it is because we have been trying only to give kids information, yet we have not been trying to give the adults who deal with children who have problems the right kind of help to deal effectively with those children.

Variations on this theme of student assistance programs are certainly an enormous step in the right direction. But I think those programs shouldn't only be in high school. We have already proven in Massachusetts, and we are going to start doing it in Michigan, that we can have those programs in the first grade where kids who live in environments that are non-nurturing will have a place to go to get the kind of help they need in addition to qualify, comprehensive K-12 education. And that is where we begin prevention.

Mr. Wolf. The last question is, are you, all of you on the panel, are you optimistic or are you pessimistic?

Ms. Kaplan. About what?

Mr. Wolf. About the future with regard to alcoholism and young people.

Ms. **Wenger**. I believe the hope is greater than the problem, or I wouldn't be doing what I do.

Mr. **Duvall**. Optimistic.

Ms. **Kaplan**. Optimistic.

Ms. **Sanders**. Optimistic.

Ms. **Rusche**. I am optimistic with a qualifier.

Mr. **Wolf**. What is the qualifier?

Ms. **Rusche**. The qualifier is that I think—and I have only learned this recently through my own experience—we have an imbalance in this country. Because who it is left up to to try to do the education and the prevention and the work are nonprofit educational organizations that must go out and raise the money through contributions, and what we are fighting are nonprofit trade associations that are using profits to give a very different message through advertising and marketing techniques. And until somehow that balance is redressed, I grieve that we may not win this war. Because if you look at the money that is being spent to persuade everybody to drink or not drink and to use drugs or not use drugs, it is way out of kilter.

Mr. **Wolf**. Thank you.

Mrs. **Boggs**. Mayor Duvall, thank you for taking your time to come to be with us. I was reading in my hometown newspaper the plea of a judge to the State legislature that is just going into session that if they impose some new restrictions on alcoholism and on driving and so on that the State also recognize that the court systems and the enforcement systems need additional help in order to carry out the new laws.

Can you tell me what you expect to do if your State grant money when it runs out to be able to hire policemen and to pay them when they are doing overtime and so on?

Mr. **Duvall**. Well, our State grant money was for this year and it has already run out. We absorbed that into our account budget and we are continuing the same enforcement effort with local resources.

On another scale, we have been talking about jails and the impact of prevention programs. In South Carolina, we are talking about building six new penitentiaries in the next few years because we have a very large overcrowding situation in South Carolina. It is my contention if they were to give the local communities the price of one of those prisons, that we could make a direct impact onto the people that are, by percentage, going to end up in the prisons at the end and they wouldn't have to build as many prisons. What we need are resources at the local level in small communities where we can have a direct impact all the way down into the home. We need resources to provide the kind of help that these ladies are talking about.

Mrs. **Boggs**. Thank you very much.

Constance, I am very, very pleased that you are here with us. This committee is dedicated, as you know, to children, youth and families. We felt that young people needed a special voice in the Congress, and we are glad that you are providing one of those voices for us here today.

Ms. **Kaplan**. Thank you.

Mrs. BOGGS. How did you find out that the student assistance counselor was available primarily for alcohol and drug problems?

Ms. KAPLAN. How did I find out in the beginning? Well, I guess the first way I found out was when I entered high school we had a schoolwide assembly for Students Against Driving Drunk, in fact. During that assembly, the person who set it up happens to be the student assistance counselor, who had just recently come into the school. I guess my involvement, getting involved in SADD was my sort of escape, and my way of dealing with the problem led me to her. And word of mouth has spread it, and she has become very popular and, basically, is not viewed as an authority figure, but more as a friend.

She is extremely accessible, which is the most important thing for kids. You could have Al-Anon, Alateen, which are good, but you can have them up to here [indicating] and some kids just won't get there. Student assistance counselors you can get to.

Mrs. BOGGS. Ms. Sanders, how do you identify the students who are children of alcoholics without stigmatizing them?

Ms. SANDERS. Well, in the first few initial interviews with the student we ask a lot of questions about the family, about the relationship with the parents, with brothers and sisters, asking about their own drinking and drug use and about that of their parents and brothers and sisters. A student referred for drinking or suspicion of drinking or drug use is another way of identification.

Mrs. BOGGS. Thank you very much.

We are very pleased, Ms. Rusche, that you are going to help this committee in an extended way through your review of the program Mr. Coats invited you to view. We look forward to having that kind of help from you.

Ms. Wenger, I am sorry that I wasn't here to hear all of your testimony. I was so impressed with the program that you are involved in, in the chemical dependency treatment center, Maplegrove. I think it is a great new area of having sort of a consortium of interest come together to be able to attack a problem and to treat people who are really chemically dependent. I thank you so much for being with us.

I regret to say that I must indeed pull the gavel down on this most interesting hearing, and I thank all of you very much for your participation.

[Whereupon, at 12:10 p.m., the task forces were adjourned, to reconvene subject to the call of the Chair.]

[Material submitted for inclusion in the record:]

ALCOHOL POLICY COUNCIL,
Waterford, VA, May 24, 1985.

Hon. LINDY BOGGS,
U.S. House of Representatives, Select Committee on Children, Youth and Families, Washington, DC.

DEAR CONGRESSWOMAN BOGGS: This is in response to a question posed by you through Congressman Miller's letter to me of May 17 and concerning the hearing chaired by you on May 2. Your question to me was:

"You say in your testimony that significant advancements have been made toward promoting an atmosphere that will eliminate alcohol related problems. Do you have any statistics that show problem drinking has decreased, that drunk driving fatalities are down, or that youth are drinking less? The statistics I have seen show all these problem categories are stable and high. In addition, the federal government has significantly decreased its efforts to provide treatment and prevention services. Would you please comment?"

Enclosed is a synopsis of the salient findings of several pieces of recent research which address the several points of your question. Additionally, I am enclosing 1) a summary background paper done for workshop participants on "Alcohol Policy and the Media sponsored by the Office of Juvenile Justice and Delinquency Prevention, United States Department of Justice," in the Fall of 1984; and 2) a copy of the September-October 1984 issue of Alcohol Policy Letter which also addresses part of your question (see page 5 article, "U.S. Number One in Traffic Safety").

Further, I have asked Ashton Brisolara, executive director of the Committee on Alcoholism and Drug Abuse for Greater New Orleans and member of the Alcohol Policy Council Advisory Board, to respond directly to you as your question relates to New Orleans.

If I may be of further service, please let me know.

Respectfully yours,

AUGUSTUS H. HEWLETT, *President.*

Enclosures.

[Item 1 a summary background paper done for workshop participants on "Alcohol Policy and the Media sponsored by the Office of Juvenile Justice and Delinquency Prevention, United States Department of Justice," in the Fall of 1984, retained in select committee files.]

DECLINE IN ALCOHOL ABUSE PROBLEMS: DATA

PROBLEM DRINKING

According to the "Fifth Special Report to Congress (1984) on Alcohol and Health", deaths from liver cirrhosis have declined by 12 percent since 1973. Cirrhosis is often used as a measure of problem drinking, although it is not a direct, simple indicator.

Among adult populations, as a result of removing the stigma, and the wide adoption of employee assistance programs, more alcoholics are coming forward voluntarily or are being referred by employers for alcoholism treatment.

Increases in AA memberhip over the past decade in part confirm this trend. Hospital Discharge Surveys conducted by the National Center for Health Statistics since 1971 also confirm more than a 160% increase in hospitalizations for alcoholism. This finding confirms removal of stigma and other barriers to treatment, not to an increase in the prevalence of alcoholism for which there are no reliable national data.

According to the comprehensive survey of the research literature on youthful drinking (Blane and Hewitt, 1977), "Generally speaking, alcoholism is not a problem for youth . . . detectable incidence and prevalence of alcoholism probably do not begin until the middle teens, after which they increase slowly with age. . . . Recent reports of increases are complicated by confusion of the effects of intoxication with alcoholism, greater public awareness and acceptance of alcohol problems, increased police attention to drinking-driving, younger age laws, clinical admission policies and methodological weaknesses (in studies to date)." (p. XII-4)

The public can benefit from what experts in health emphasize from a multiple-choice list of 24 health and safety factors, as reported in a 1984 Louis Harry survey conducted for Prevention Magazine. Experts rate drinking in moderation as high as eighth out of 24 such factors, while the general public count moderate drinking 23rd of 24 factors helping people to live a long and healthy life. On May 10 the National Invitation Policy Forum (composed of alcoholism professionals) agreed that there should be (1) wider awareness of this expert consensus, (2) the public badly needs re-orientation.

DWI FATALITIES

It is encouraging to report that highway fatalities in 1984 were 5,400 fewer than in 1981. Using the common (official) wisdom of the 50% figure for alcohol-related deaths, there were 2,700 fewer victims of such accidents—during a period when more people than ever were driving more miles than ever. The source of these data is the National Highway Traffic Safety Administration (DOT) compiled from the Fatal Accident Reporting System (FARS).

But no lasting improvement will be sustained without a coordinated, ongoing systems approach to the problem of drinking and driving. As noted by Dr. Robert Marshall (ICAA Congress, Athens, 1984), when measuring for exposure (vehicle miles traveled), the rate of fatalities declined 48.3% in the U.S. from 1966 to 1982 and he attributed this noteworthy improvement to the systems approach—focusing on the driver, vehicle, road and roadside environment through the 18 Federal highway standards of the 1966 Highway Safety Act.

Dr. Robert Voas, in his DOT-funded 1982 national study, ranked the USA ahead of other countries, with the lowest rate of alcohol-related fatalities. This study was done prior to effects of the massive DWI crackdown in the USA during the past four years.

Efforts to prevent intoxication and irresponsible driving must target social circles, peer groups, working relationships and private sector initiatives. Toughening the laws to bring about change will *not* alter the need for treatment and education, as Dr. H. Lawrence Ross concluded in his DOT-funded multi-national DWI crackdown study.

The Presidential Commission on Drunk Driving recommendations recognized that short-term remedies could mislead the American public into believing that a "solution" has been found.

YOUTHFUL DRINKING

Surveys conducted by Dr. Lloyd Johnston and his University of Michigan associates for the National Institute of Drug Abuse shows that: "The proportion of seniors reporting alcohol use in the prior 30-day period was 72 percent in 1979 and 67 percent in 1984. More importantly, the number of seniors drinking daily, or almost daily, fell from 7 percent to 5 percent over the same interval. The number reporting any occasions of recent "heavy drinking" (five or more drinks in a row during the prior two weeks), fell in 1984 from 41 percent to 39 percent the first decline since the study began." (The U.S. Journal of Drug and Alcohol Dependence, Feb., 1985)

Jessor and Jessor, who have studied adolescent development and behavior (including drinking) concluded from their intensive studies that adolescent problem drinking (a) is part of a pattern of deviant, problem behavior and (b) most adolescents "mature out" of such deviant drinking and other behavior problems as adults.

The Jessors' findings are supported by a longitudinal study of parents and their offspring in Tecumseh, Michigan. Ernest Harburg and his associates at Michigan State University studied residents in that community for a number of years. Among their findings, with regard to the drinking phases of these comprehensive studies: (1) offspring of abstainers tend toward heavy drinking, if they drink at all; (2) moderate drinking offspring imitate parental drinking patterns; (3) offspring of heavy drinkers tend to drink, but they avoid abusive consumption patterns of parents.

REFERENCES

Secretary of Health and Human Services. Fifth Special Report to the U.S. Congress on Alcohol and Health. DHHS Pub. No. (ADM) 84-1291. Washington, D.C. 141pp. 1983.

Blane, H. T. and L.E. Hewitt, "Alcohol and Youth: An Analysis of the Literature, 1960-1975" a report prepared under NIAA Contract ADM-281-75-0026. Springfield, VA: National Technical Information Service, Pub. No. PB-268-698, 1977.

Taylor, H. and M. Kazay. "Prevention in America.' Results of a poll by Louis Harris and Associates, Inc. conducted for Prevention magazine, 1983 and 1984.

Marshall, R. L. "Alcohol and Highway Traffic Safety Efforts in the United States of America." Paper presented at 14th International Institute on the Prevention and Treatment of Drug Dependence, Athens, Greece, June 1, 1984.

Voas, R. B. "Drinking and Driving: Scandanavian Laws, Tough Penalties and United States Alternatives." A report prepared for NHTSA, contract DTNH-22-82-P-05079. Springfield, VA: National Technical Information Service, 72 pages, June 1, 1982.

Johnston, L. "High School Survey Finds Drug Use Continues to Decline." U.S. Journal of Drug and Alcohol Dependence, p. 21, February, 1985.

Donovan, J., R. Jessor and S. Jessor. "Problem Drinking in Adolescence and Young Adulthood." Journal of Studies on Alcohol, 44:109, 1983.

Harburg, E., D.R. Davis and R. Caplan. "Parent and Offspring Alcohol Use: Imitation and Aversive Transmission." Journal of Studies on Alcohol, 43:497, 1982.

PREPARED STATEMENT OF DOUGLAS W. METZ, EXECUTIVE VICE PRESIDENT AND GENERAL COUNSEL, WINE AND SPIRITS WHOLESALERS OF AMERICA, INC.

Mr. Chairman and Members of the Committee, less than a year ago, the Wine and Spirits Wholesalers of America, Inc. broke new ground with the advent of a Family Awareness Program to motivate families to discuss the legal and responsible use of alcohol. This is not a group one would expect to lead the bandwagon on alcohol abuse warnings. This segment of the alcohol beverage industry is urging parents to regularly discuss the use and abuse of alcohol with their children. The Wine and Spirits Wholesalers of America, Inc. is a Washington-based trade association representing 800 distributors of alcohol beverages in 43 states.

The Wine and Spirits Wholesalers of America, Inc. is committed to a campaign for responsible use of alcohol beverages. As Irving Shapiro, former chairman of the DuPont Company, said, "Either responsible individuals do these things or irresponsible people will."

The fact that among those calling on parents to make their warnings more meaningful and frequent are the wholesalers makes it clear how insufficient the current admonitions by parents may be. According to a nationwide survey conducted on behalf of the Wine and Spirits Wholesalers of America by the Gallup Organization, Inc., most teenagers easily forget such warnings from parents. The survey also found that parents could do a better job of talking to their teenagers about the responsible use of alcohol beverages.

WSWA believes that alcohol education should not be left solely to schools or other community institutions. Family dialogue is essential. Here are a few facts about the program:

> In developing its program, WSWA surveyed various alcohol education programs around the country. WSWA found many programs sponsored by schools, churches and community organizations, but few of these programs were directed toward families. WSWA's program is intended to fill this gap.
>
> As part of the Family Awareness Program, WSWA sponsored the Gallup poll to measure the current extent of dialogue on this issue and the need for additional parent/child communication. The Gallup researchers concluded that ". . . whatever information parents are trying to communicate is being lost, and there is a possible need for greater depth of communication."
>
> WSWA asked Dr. Gail Gleason Milgram, of the Rutgers University Center for Alcohol Studies, to serve as editor and consultant to the booklet, "Let's Talk About Drinking." This publication is a guide for parents and children to begin talking about alcohol use or non-use. Dr. Milgram has had an extensive background as an expert in the area of alcohol and family communication. Dr. Milgram is the author of several books on the subject and is the Director of Education at the Center for Alcohol Studies. She is also the executive director of the Summer School of Alcohol Studies and the New Jersey Summer School of Alcohol and Drug Studies. In addition, Dr. Milgram has completed media tours in Chicago and Washington discussing the booklet and the WSWA program.
>
> More than 25,000 copies of "Let's Talk About Drinking" have been distributed in the three months since the booklet was printed. The booklet has become so popular that a second printing run for at least another 25,000 copies has been authorized.
>
> Public service announcements promoting the booklet are being shown in more than 40 congressional districts around the country on 150 television and 80 radio stations. The PSAs have been made in Spanish as well as English. More than 100 U.S. representatives and senators have either taped the spots or expressed interest in doing so. Participating congressmen and senators are distributing the booklets to constituents.
>
> Last December, the association sponsored a Family Awareness Conference to develop recommendations on how parents can provide the most effective guidance for their children in instilling proper attitudes about the use or non-use of alcohol. The event was held on December 19 in Washington, D.C. The conference brought together experts in the fields of alcohol studies and family communication, and representatives of government and the alcohol beverage industry. The event received major press coverage and was broadcast live on C-SPAN, the public affairs cable network.

The media has been supportive and interested in the WSWA approach. An article published on December 19, 1984 in "Family Weekly" magazine, the Sunday newspaper supplement with nearly 13 million in circulation, acknowledged the Wine and Spirits Wholesalers of America for sponsoring the Gallup poll. The article included the results of the survey and gave tips and suggestions for families to initiate discussion on the subject. In similar press clippings, WSWA has been acknowledged for its social initiatives campaign by the Associated Press, USA Today, Congressional Quarterly and the National Journal. In total, more than 25 million people have either heard or read about the WSWA program since December.

Although there are hundreds of alcohol education programs around the country, the WSWA Family Awareness Program is unique because of its focus among indus-

try groups. WSWA has assumed industry leadership in educating families about the use and abuse of beverages containing alcohol.

When the trade association began this effort, it was not sure how the campaign would be received. Based on the support thus far, the program is on a fast track for success by meeting its objective of encouraging families to discuss the use, abuse and non-use of alcohol.

The Family Awareness Program is but one of two nationwide public service campaigns by the association. WSWA members are working with the U.S. Jaycees on a major program called "Responsible Decisions." This effort is a public education campaign aimed at generating proper and responsible attitudes toward the use or non-use of alcohol beverages. The effort is targeted at the 7,000 communities served by the Jaycees and its 300,000-plus members. The circulation of educational materials in the communities was keyed around the "Critical Dozen Days" between December 21, 1984 and January 2, 1985, although this program is applicable year-around.

The WSWA programs are classic examples of how the private sector can help educate consumers and also assist the government in providing information to safeguard public health. The Wine and Spirits Wholesalers of America, Inc. has taken a firm stand in promoting the legal and responsible use of alcohol. The association is to be commended for its well-planned public service campaigns and for showing what a difference an industry can make in the lives of millions of consumers.

U.S. House of Representatives,
Select Committee on Children, Youth, and Families,
Washington, DC, May 17, 1985.

Mr. John Burcham,
National Liquor Store Association, Inc.,
Bethesda, MD.

Dear Mr. Burcham: This is to express my personal appreciation for your appearance before the Select Committee on Children, Youth, and Families at the hearing held jointly by the Prevention Strategies and Crisis Intervention Task Forces on May 2, concerning prevention of alcohol abuse. Your participation contribted greatly toward making the hearing a success.

The Committee is now in the process of preparing the transcript of the hearing for publication. It would be helpful if you would go over the enclosed copy of your testimony to make sure it is accurate, and return it to us within three days with any necessary corrections.

In addition, Mrs. Boggs would appreicate your answering the following questions for the record:

1. In your testimony you mentioned the effort The Wine Institute is making in California to address alcohol abuse. Could you describe The Community Mobilization for Action Project in more detail?

2. I was interested to hear about licensed Beverage Information Council's (LBIC) involvement in the "Healthy Mothers/Healthy Babies" campaign. Can you tell us more specifically what LBIC contributes to that effort?

Let me again express my thanks, and that of the other members of the Select Committee for your testimony.

Sincerely,

George Miller, *Chairman.*

Enclosure.

Licensed Beverage Information Council,
Washington, DC, May 20, 1985.

Hon. George Miller,
Chairman, Select Committee on Children, Youth, and Families, Washington, DC.

Dear Congressman Miller: In line with your May 15 request, enclosed is the corrected transcript of my testimony before the Select Committee on Children, Youth, and Families on May 2, 1985.

While we will forward to you shortly a full written statement covering all facets of the LBIC public education program, described in highlight form in the enclosed brochure, you asked me to provide more detail on two specific projects mentioned in my May 2 statement.

Enclosed is a one-page description of the origins and activities of the Healthy Mothers/Healthy Babies campaign, which LBIC has supported since its inception in 1982.

You also asked for more detail on the Community Mobilization Act Project (CMAP), a program in California supported by Wine Institute, which is one of ten alcohol beverage industry association members of LBIC. I understand that details of the CMAP are being provided to you directly by Wine Institute representatives.

Sincerely,

JOHN B. BURCHAM Jr., *Chairman.*

Enclosure.

LICENSED BEVERAGE INFORMATION COUNCIL,
Washington, DC, May 20, 1985.

Healthy Mothers/Healthy Babies:
A Cooperative Program Sponsored by the U.S. Surgeon General.

In the Fall of 1982, the Surgeon General of the United States announced the Healthy Mothers/Healthy Babies (HM/HB) program to focus government and private sector resources and attention on maternal and prenatal care so as to improve the chances of healthy pregnancy outcomes for mothers and infants.

Private sector groups representing medical specialities, voluntary organizations and business were asked to cooperate and participate in the HM/HB coalition. Nearly fifty groups agreed to cooperate, with a timely assist from the Cabinet Wives group, which has co-sponsored two annual fund-raising dinners, held in 1983 and 1984.

The Surgeon General, through the HHS Assistant Secretary for Health, selected six focused topics to increase maternal and health care provider awarness. The topics emphasized the desirability of balanced, nutritious diet; benefits of breast feeding; avoidance of smoking; avoidance of excessive drinking; the value of early and continuous prenatal care; and refraining from taking any drugs or medicines not prescribed by a physician. Corporate sponsors paid for printing of 10,000 English and Spanish posters and one million information cards displayed and distributed in the 8,000 public health clinics in this country.

LBIC sponsored the poster and information card on alcohol and pregnancy; copies of the English language versions are attached.

A second phase of the HM/HB campaign will include preparation and distribution of health care professional packets of sample patient information materials, state of knowledge papers and other timely materials on various maternal and prenatal topics.

In addition, the HM/HB Coalition is fostering the organization of state-level coalitions for communication and cooperation purposes. The Coalition is planning seven regional conferences to share knowledge and models of clinical, public information and related approaches—all aimed at improving maternal and fetal health.

LBIC is committed to continue cooperating with the Department of HHS, through the Suregon General, and with the Healthy Mothers/Healthy Babies campaign, in every appropriate way.

WINE INSTITUTE

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415/986-0878
Cable "WINE" Telecopier 415 391 4269

JUN 3 1985

May 29, 1985

The Hon. George Miller
U.S. House of Representatives
Select Committee on Children, Youth and Families
385 House Office Building Annex 2
Washington, D.C. 20515

Dear Mr. Miller:

Enclosed please find additional information on Wine Institute's education and health initiatives, as requested by your staff in follow-up to the March 18 hearing on "Alcohol Abuse and its Implications for Families".

John De Luca joins me in sending regards, and if we can provide additional information or answers to specific questions please let me know.

Cordially,

Patricia Schneider

Patricia Schneider
Education Director

PS:gr

cc. JDL
AHS

WINE INSTITUTE: TRADITIONS AND PRACTICES OF SOCIAL RESPONSIBILITY

Wine Institute, the trade association of the California vintners, represents 492 California wineries and thousands of grape growers across the state. Our membership includes the vast majority of vintners, approximately 93 per cent of the California industry in number. We do not represent wineries outside the state nor imported wines. Our perspective is based on a predominantly rural agricultural membership. Institute represents several large firms, but the vast majority are small family operations. The wine industry has its roots in European winemaking traditions characterized by wine's association with meals and family heritage.

Wine Institute recognizes that alcohol abuse and alcoholism are complex public health problems, requiring all citizens both private and corporate, to cooperate in finding solutions. The California vintners are involved in a variety of state and national projects to encourage the proper use of wine and to find more effective ways of delivering prevention services to communities. These voluntary initiatives are part of our commitment as a socially responsible industry to reduce alcohol problems and because we recognize that the private sector has an important cooperative role to play.

Although the vast majority of our consumers use wine in moderation, wine contains alcohol and can be misused. Wine Institute is in the forefront of those who advocate responsible use of our product.

Our educational approach includes:

(1) Promote wine through responsible marketing and advertising practices.

(2) Educate wine drinkers about proper use of the beverage.

(3) Emphasize our agricultural heritage as a moderate mealtime table beverage.

(4) Participate in credible, innovative projects to reduce alcohol misuse.

We carefully design our public information materials to reflect proper attitudes and stress the use of wine with food which research shows is an important part of safe drinking habits. Similarly, we advocate through our Code of Advertising Standards principles and attitudes which support responsible behavior:

> Hold overindulgence and intoxication to be unacceptable behavior; advocate that wine be consumed moderately in mealtime settings; prohibit the use of athletes (amateur or professional) and other celebrities with particular appeal to underage youth; prohibit any suggestion of drinking and driving; discourage any attempt to overglamourize or associate wine with rites of passage for young people.

We encourage our wineries to emphasize these principles, especially in marketing and advertising practices and as part of good winery management. We also work with wine educators, wine and food writers and the broadcast media to encourage appropriate attitudes and standards.

For fifty years since repeal of Prohibition, Wine Institute has had an extensive program of scientific and medical research, including co-sponsorship of five national medical symposiums on wine and health. We also participate in social research projects including a study of children's perceptions of alcoholic beverage advertising, drinking patterns of women in stress, and drinking patterns of youth on college campuses. The attached Fact Sheets describe Wine Institute's educational programs.

FACT SHEET

Substance Abuse Program/Strategy

Program/Strategy Title (if applicable):

Organization Name: Wine Institute
Code of Advertising Standards

Other Organizations Involved Or Associated With This Program:
Consumers, media, vintners, wine writers and educators, Society of Medical Friends of Wine, Agricultural groups and universities, Alcohol and health professionals, among others, were consulted in preparing the Wine Institute Code of Advertising Standards.

Program/Strategy Type:

X Awareness
X Education
___ Treatment
___ Financial Support
___ Other, Specify: Voluntary self-regulation on advertising issues.

Goal of Program: To encourage continued high standards of responsible marketing and advertising practices by Wine Institute's 492 member California wineries

Program Message(s): To educate wine drinkers about the proper use of wine as a moderate table beverage with food; to address social issues to reflect the industry's concern with maximum social responsibility.

Target Audience: Voluntary subscribers to Wine Institute Code of Advertising Standard

Program Components: (Include Communication Medium(s) used as well as a list of program material used, i.e.: Public Service Announcement, brochure, etc.)

1. Wine advertising shall include foods and show that they are available to be used, or intended to be used, with wine.
2. Wine shall not be depicted for the effects its alcohol content may produce, including direct or indirect reference to alcohol content or strength.
3. Association of wine use in conjunction with feats of daring or activities requiring unusual skill is specifically prohibited.
4. Wine shall not be directly associated with social, physical or personal problem solving.
5. Wine shall not be presented as being essential to personal performance, achievement, success, or wealth.

(over)

Program Components (cont.):

6. Advertisements shall not suggest that wine is crucial for entertaining.

7. Any ad. with particular appeal to persons below the legal drinking age is unacceptable, therefore wine advertisers will not: a). Show models and personalities in advertisements who appear to be under 25 years of age; b). Use music, language, gestures or cartoon characters specifically associated with or directed toward those below the legal drinking age; c). Appear in children's or juveniles' magazines, newspapers, television programs, radio programs, or other media specifically oriented to persons below the legal drinking age; d). Be presented as d. (contd.) being related to the attainment of adulthood or associated with "rites of passage" to adulthood; e). Suggest that a wine product resembles or is similar to another type of beverage or product (milk, soda, candy) having particular appeal to persons below the legal drinking age; f). Use traditional heroes of the young, such as those engaged in pastimes and occupations having a particular appeal to persons below the legal drinking age (for example: cowboys, race car drivers, rock stars, etc.); g). Use amateur or professional sports celebrities, past or present.

8. Advertising wine should in no way suggest that wine be used in connection with driving.

9. Wine advertising shall not appear in or directly adjacent to television or radio programs or print media which dramatize or glamorize over-consumption or inappropriate use of alcoholic beverages.

10. Wine advertising will make no reference to wine's medicinal values.

11. Wine advertising shall not degrade the image or status of any ethnic, minority or other group.

12. Wine advertising shall not feature provocative or enticing poses nor be demeaning to any individual.

Impact Statement:

All advertising, including but not limited to direct mail, point-of-sale, outdoor, displays, radio, television and print media should adhere to both the letter and spirit of the Code.

Evaluation Information:
(Concrete & factual
information--attach
report if available)

The Code of Advertising is closely monitored by Wine Institute to encourage continued high standards by wine advertisers.

FACT SHEET

Substance Abuse Program/Strategy

Program/Strategy Title (if applicable): Private and volunteer citizen effort to reduce alcoholism and prevent alcohol problems among youth and families in eight California counties

Organization Name: California Mobilization for Action Program.

A diverse coalition of state organizations committed to reducing alcohol problems

Other Organizations Involved
Or Associated With This Program:
Alcoholism Council of California (ACCal)
California State PTA
California State Farm Bureau
California State AFL-CIO
Wine Institute

Program/Strategy Type:

X Awareness X Education

____ Treatment ____ Financial Support

X Other, Specify: Early Identification & Intervention to reduce alcohol problems

X Health promotion

Goal of Program: To form a partnership with key leaders from community and business groups to sponsor and deliver programs to target populations. These groups, including corporate leaders, have traditionally not been involved in alcohol issues.

Program Message(s): Innovative health education programs vital to community needs can be created and effectively sustained by a coalition of diverse groups. This unique private sector initiative involves no government funds.

Target Audience:
kids, adolescents, teenagers (Gr. K-12); families; special populations at risk

Program Components: (Include Communication Medium(s) used as well as a list of program material used, i.e.: Public Service Announcement, brochure, etc.)

8 county taskforces to determine local needs:
Statewide Youth rap-groups
Film: The Mountain
55,000 Walkaware/Alcoholism Referral brochures
Youth education and services, pre-teens, Yuba county
Seminars on Alcohol and Youth, Orange County (Dr. Patric O'Gorman, Former Prevention Director, NIAAA)
Alcohol education curriculum and materials (K-12) for use in schools, service organizations and youth clubs, Santa Barbara
"Jody" media campaign, Sonoma County
Alpha-Teen project, Riverside County, DUI seminars
Residential Youth Treatment Center (national model), Visalia
Women and Alcoholism, Santa Cruz (brochure)
Alcohol and Substance Abuse Awareness Days, Sutter and Yuba counties

(over)

Program Components (cont.):

Impact Statement:

PREVENTION: Primary prevention of alcohol misuse, abuse and alcoholism includes a variety of constructive processes designed to promote personal and social growth of the individual toward full personal human potential and thereby inhibit or reduce physical, mental, emotional or social problems.

Evaluation Information:
(Concrete & factual
information--attach
report if available)

Programs are closely monitored by the Alcoholism Council of California. Evaluation reports are submitted to ACCAL on an annual basis. CMAP consultants provide feedback and evaluation on a by-county basis.

As a result of CMAP, 8 diverse county programs have been established and continue to thrive in California. See CMAP brochure for detailed analysis of county program and new efforts spawned by CMAP.

Copies are available from Wine Institute.

FACT SHEET

Substance Abuse Program/Strategy

Program/Strategy Title (if applicable): Social Responsibility & Drunk Driving Statement of Policy

Organization Name: Wine Institute
Social Responsibility & Drunk Driving

Other Organizations Involved Or Associated With This Program:

Program/Strategy Type:

X Awareness
X Education
___ Treatment
___ Financial Support
X Other, Specify: Public Policy Statement

Goal of Program: To augment the California wine industry's educational and health programs with a responsible policy on drunk driving issues.

Program Message(s): Wine Institute Laws & Regulations Committee, believing that wine is a beverage of moderation, recognizes that the wine industry should promote responsibility and education in the drinking habits of young adults to prevent or discourage the drunk driving problem, supports the establishment of a national uniform legal purchase and public possession age for alcoholic beverages of 21 years

Target Audience: Wine Institute membership of 492 California winemakers

Program Components: (Include Communication Medium(s) used as well as a list of program material used, i.e.: Public Service Announcement, brochure, etc.)
Brochure, Statement of Policy
Social Responsibility and Drunk Driving

(over)

Program Components (cont.):

Impact Statement: In addition to support of a national uniform legal purchase and public possession age of 21 years for alcoholic beverages, WI believes that solutions to the drunk driving problem must go far beyond the classification of a legal age. Better enforcement of existing laws, more severe penalties for drunk driving offenders, and a community focus that increase the perception of risk of arrest, are necessary elements of a comprehensive program. WI Board of Directors supports in principle many of the recommendations of the Presidential Commission on Drunk Driving.

Evaluation Information:
(Concrete & factual
information--attach
report if available)

Not applicable

Copies of the Statement are available from
Wine Institute

LBIC LICENSED BEVERAGE INFORMATION COUNCIL
1250 EYE STREET, N.W. • SUITE 900 • WASHINGTON, D.C. 20005 • (202) 628-3544

June 4, 1985

The Honorable George Miller
Chairman, Select Committee on
Children, Youth and Families
385 House Office Building
Annex 2
Washington, D.C. 20515

Dear Mr. Miller:

Following up on May 2, 1985 public hearing by the House Committee you chair, enclosed is a detailed statement we are submitting for the record and for the possible benefit of members of your committee.

This statement on activities of the Licensed Beverage Information Council is comprehensive, even though other projects are in varying stages of planning and implementation. LBIC will co-sponsor a series of regional conferences of state coalitions in the Healthy Mothers/Healthy Babies campaign launched in 1982 by the Surgeon General of the United States.

Publications on child abuse and pastoral care of alcoholics will soon be released under two separate LBIC-sponsored programs.

We are committed to continuing to help raise public and professional awareness on the complex alcohol abuse issues we have been addressing since 1979, and we will be pleased to keep you informed as projects are launched.

Sincerely,

John B. Burcham

John B. Burcham, Jr.
Chairman

Enclosure

American Beverage Alcohol Association
National Liquor Stores Association, Inc.
Association of American Vintners
National Restaurant Association
Distilled Spirits Council of the United States, Inc. (DISCUS)
United States Brewers Association, Inc.
National Association of Beverage Importers, Inc.
Wine and Spirits Wholesalers of America, Inc.
National Licensed Beverage Association
Wine Institute
Ex officio: National Conference of State Liquor Administrators

STATEMENT OF THE LICENSED BEVERAGE INFORMATION COUNCIL

TO

SELECT COMMITTEE ON CHILDREN, YOUTH AND FAMILIES

U.S. HOUSE OF REPRESENTATIVES

May, 1985
Washington, D.C.

The Licensed Beverage Information Council (LBIC) appreciates this opportunity to report on our extensive public education programs.

In these days of concern over teenage drinking, fetal alcohol syndrome, drunk driving and other alcohol abuse problems, our industry is demonstrating its sense of social responsibility through the industrywide efforts being sponsored by the LBIC.

The Licensed Beverage Information Council was formed as the industry's response to a 1978 study by the U.S. Department of the Treasury. That study concluded that the public education approach was needed to raise the awareness of American women concerning drinking and pregnancy.

At a news conference in February 1979, treasury officials called for the industry to undertake this responsibility. Ten industry trade associations formed the council and pledged its cooperation with the government. We agreed to conduct a broad-based public awareness campaign because we agreed with experts who have concluded that education is an infinitely more effective alternative to simplistic regulatory approaches, such as a warning label, or advertising bans, or sumptuary taxes.

The LBIC is comprised of the ten leading industry associations representing those who produce, import, distribute and sell beer, wine and spirits in this country.

The focus of LBIC efforts is on public education. Ours is not an advocacy group on public policy issues. Our goal is simply assisting in finding and communicating to the public and professionals valid information regarding problems related to alcohol misuse.

Since 1979 the LBIC has followed a multi-media, multi-agency strategy with specific target audiences, especially on issues such as fetal alcohol effects. There is no single group possessing all the expertise and outreach necessary for such programs.

Our efforts address the problems of excessive drinking that affect children, youth and families. Projects supported by LBIC are the ultimate responsibility of independent organizations specializing in research, education, treatment and traffic safety. They stand squarely behind the programs that they prepare, but which LBIC support makes possible.

Our LBIC program brochure is attached as Exhibit 1.

While the LBIC is the first industrywide public education effort, we would point out that industry trade associations and member companies also carry on their own extensive public education campaigns and research support programs.

The voluntary industry response to this challenge is unprecedented. Not only are the producers of beer, wine and liquor conducting major programs, but those associations which represent bartenders, waiters and waitresses, restaurants, convenience stores and others, are also contributing substantial efforts to educate the public to the wise, proper and moderate use of alcohol beverages by those who elect to drink and to prevent product misuse.

Many of these educational efforts, in particular, are directed toward America's youth, including those in high schools and colleges.

There are cooperative programs with volunteer organizations, such as SADD (Students Against Drunk Driving) to help curb the tragedies associated with drinking and driving.

Basically, our industries and their allies recognize a social imperative to participate in voluntary efforts to modify the behavioral problems associated with alcohol misuse.

Today, every medium of communication is being used to an extensive degree to advance alcohol abuse prevention strategies and to recognize that the misuse of alcohol is a "people" problem that requires multi-faceted solutions, since human behavior modification is more complex than simply saying "thou shalt not."

One pamphlet prepared by the Distilled Spirits Council of the United States on problems of teen-age drinking illustrates both the problem and the pursuit of a solution. It is entitled "No One Answer."

There are literally hundreds of ongoing educational programs--conducted at local, regional, state and national levels by various beverage industry groups and individual companies, utilizing the medium of print, television and radio to reach both general audiences and specifically targeted groups.

Since 1979, for instance, the USBA has sponsored a national alcohol awareness program called "Think Twice ...About Drinking." Under its alcohol awareness program, the brewers of malt beverages distribute information kits, brochures and sponsor other activities to encourage the use of these beverages with moderation, under appropriate circumstances and in conformance with legal requirements.

USBA publishes a quarterly journal called On-Campus Review, which provides a round-up of ideas for college alcohol education programs. It produces an on-campus education manual for use by college administrators and others. Another pamphlet called "Cheers" provides guidelines for responsible operation of college pubs.

The Wine Institute has developed the Community Mobilization Action Project (CMAP), a cooperative program with the overall aim of building coalitions of groups that may not have joined in previous partnerships to reduce alcohol abuse; encourage referrals to treatment for those who are in trouble because of excessive drinking; or, cooperatively to prevent abuse. Wine Institute has provided funds for CMAP. Other groups lending support and encouragement to CMAP include the Alcoholism Council of California (a voluntary group), California State PTA, California AFL-CIO and the California Farm Bureau.

The Distilled Spirits Council of the United States was a founding sponsor of BACCHUS, meaning Boost Alcohol Consciousness Concerning the Health of University Students, a program which started on the campus of the University of Florida and which now exists at schools throughout the U.S.A. and Canada. The Miller Brewing Co. is another active sponsor of BACCHUS.

Anheuser-Busch Brewing Co. has developed another campaign for college students and other young adults called the Buddy System, which includes an organized telephone program so that college students can call a friend for transportation, rather than taking a chance on driving while intoxicated.

More recently, all segments of the alcohol beverage industry have implemented and supported prevention programs aimed at young age groups.

Again, we refer to pioneering work carried on by DISCUS, which since the mid-1970's has worked with the National Football League (NFL) to sponsor television and radio and print messages directed to young people specifically about responsible decision-making with alcohol. In addition, DISCUS has developed alcohol education programs together with the National Association of State Boards of Education, with the National Education Association and others.

Research has consistently shown that parents are the major influence in shaping young people's drinking habits. The Wine and Spirits Wholesalers of America has launched two nationwide education programs to assist families in promoting responsible decisions about the use of alcohol beverages. WSWA's family awareness program is intended to motivate parents to discuss the legal and responsible use of alcohol with their children.

So far more than 30,000 copies of the WSWA booklet, "Let's Talk About Drinking," have been distributed to Congressional offices to be handed out to constituents. To date more than 50 members of Congress have taped public service announcements promoting the booklet and the PSAs are being aired around the nation by 150 television and radio stations. Much of the support shown in Congress for the program has been a result of "Dear Colleague" Letters sent by Congressman George Miller and Senator Paula Hawkins. The program has been acknowledged by the press in the magazine Family Weekly, Congressional Quarterly and the National Journal.

The Wine and Spirits Wholesalers are also working with the United States Jaycees in a program called, "Responsible Decisions." This effort is a public education campaign aimed at generating proper and responsible attitudes toward the use and non-use of alcohol beverages.

The brewing, distilling and wine industries have all been actively supporting, on both the national and state level, Students Against Driving Drunk (SADD)—another program aimed at opening the lines of communications between parent and child on the subject of alcohol use and misuse. SADD motivates teenagers to create awareness in their homes, schools and communities about the dangers of drunk driving. In June, 1984 President Reagan specifically commended SADD for helping to create "a groundswell of awareness and action" which has helped educate the public about the dangers of drunk driving.

The alcohol beverage industry wants its products to be used in moderation and in appropriate circumstances. A number of industry programs are aimed at showing people of legal age who choose to drink how to use our products safely.

The voluntary advertising codes of the Wine Institute, USBA and DISCUS ensure that our advertising is consistent with our concern about alcohol misuse and show the appropriate consumption of our products.

A number of retailer groups and others have recognized the importance of preventing drunk driving by training the proprietors and employees of establishments which sell alcoholic beverages.

In November, 1984, the National Licensed Beverage Association announced a new national Techniques of Alcohol Management (TAM) education program, which in effect will educate the servers of alcohol on the best, state-of-the-art techniques to curb abusive drinking and drunk driving.

Endorsed by Mrs. Virginia Knauer, special consumer advisor to the President, the TAM program is the outgrowth of a program developed in Michigan which has--through seminars across the state--certified some 5,000 people in the techniques of alcohol management. Now, under the sponsorship of the National Licensed Beverage Association and the Stroh Brewery Co., this national effort is being conducted to train bartenders, waiters and waitresses about the effects of alcohol on the body and how to deal with problems arising from its misuse.

As their contribution to the anti-drunk driving effort, the National Liquor Stores Association launched its "Yield the Keys When Driving" program. The program, carried out in retail outlets, consists of bumper stickers, key chains, window decals and a print advertisement urging safe driving practices. Through the NLSA Program, the message is conveyed at the same time the alcohol beverage is purchased.

Through counter cards and other on-premise materials, Anheuser-Busch's "Know When to Say When" campaign spreads the message: "Enjoy Yourself when you drink... but be responsible. Don't Climb Behind the wheel when you've had too much to drink." A-B is developing a designated driver program called "I'm Drivin'." One person in a group of patrons elects not to drink and will be responsible for driving the others home. The person is entitled to free soft drinks during the evening.

Both A-B and Miller Brewing Companies are supporting a server training program called T.I.P.S., developed by the Health Education Foundation.

The National Restaurant Association, with 10,000 member companies representing 100,000 food service outlets, has a three-part alcohol awareness program. It produced a holiday season TV public service announcement called "Know Your Limits," plus posters and table displays. It runs a training seminary for service staff, through state restaurant associations, and it has also adopted practices encouraging food service in bars, as well as alternative transportation programs. Moreover, NRA frowns on free drinks or "Happy hours" which might foster intoxication.

The California Beer Wholesalers Association is cooperating with on-sale taverns and restaurants on an anti-drunk driving program called Taxi Time to provide taxi rides home for bar patrons in need.

Part of any "solution" to the problem of alcoholism is adequate alcoholism treatment. Distillers, vintners and brewers have all encouraged early intervention into alcohol abuse problems by promoting employee assistance programs. Through EAP's employers can motivate workers to seek help at an early stage of their illness. Virtually every employee of every brewer, vintner and distiller is covered by these programs. USBA's Employee Assistance Program Manual shows other businesses how to establish and operate these programs. The Adolph Coors Company has taken the EAP concept a step farther by encouraging the implementation of wellness programs which help prevent problems from developing by showing employees how to manage stress better and adopt lifestyles which promote good health.

Though we feel all these programs are helping to alleviate the misuse of our products, we recognize that much remains unknown about the causes of alcoholism and alcohol problems. Obviously, continued research is needed.

The U.S. brewing industry supports continuing research through the Alcoholic Beverage Medical Research Foundation at the Johns Hopkins University. The research priorities of the Foundation include: the effects of moderate drinking, the factors influencing the transition from moderate to excessive drinking and the causes of drunk driving.

In 1980, Joseph E. Seagram and Sons gave a $5.8 million grant to Harvard for investigation into the fundamental biological, chemical and genetic aspects of alcohol metabolism and alcoholism. The Seagram's grant represents one of the largest sums ever awarded by private industry for scientific research.

DISCUS's independent Scientific Advisory Council since 1960 has provided funding for basic research into the causes, results, treatment and prevention of alcohol abuse. Over 400 projects have been funded through this program.

The Wine Institute has had an extensive program of scientific and medical research, including co-sponsorship of five national medical symposiums on wine and health. The Wine Institute also participates in social research projects including drinking patters of women in stress and drinking patters of youth on college campuses.

Dozens of videotapes and slideshows prepared by various associations, which have been aired on local and network TV shows, or shown to national meetings and to regional seminars.

Industry-sponsored brochures, pamphlets and other publications run to the hundreds, with titles like "Somebody Do Something" (Miller Beer) or "Operation Alert" (Anheuser-Busch).

Each phase of the LBIC public education campaign builds on the successes of its previous activities, but greatly expands them. The Licensed Beverage Information Council has broadened its charter beyond drinking and pregnancy. The expanded program takes into account recommendations by the Departments of Treasury and Health and Human Services in their joint 1980 report to Congress.

Their report itself was the outcome of extensive consultations by those two federal agencies with a broad spectrum of research, health and communications experts. Education was clearly encouraged.

We thoroughly investigated the various areas of concern covered by the 1980 report, and discussed those areas with medical, health and other professionals. As a result, we developed the following strategy for our public education program.

First, continued attention to the problem of drinking and pregnancy, with emphasis on research and medical education. LBIC is now recognized as a prime public information source on fetal alcohol effects.

Second, expansion of the Council's public education activities to include the field of alcoholism. This complex subject relates to some of those problem drinkers who are repetitively involved in drunk driving and other tragedies.

Our emphasis on alcoholism includes a specific sub-campaign theme: "Alcoholism, the Treatable Disease."

An innovative project by the Alcohol and Drug Problems Association of North American provides information on alcoholism among professional and working women. In addition we have a joint effort with the American Council on Alcoholism whereby the answers to the most frequently asked questions about alcohol abuse--including drunk driving--have been distributed in a booklet.

Under its public education program, the LBIC decided to further expand its charter to include the problem of drunk driving.

LBIC collaborated with the Outdoor Advertising Association of America on a cooperative public service project to place drunk driving messages on outdoor billboards in twenty-eight metropolitan areas throughout the United States. The first wave of billboards appeared between Christmas, 1982 and the New Year. Consecutive waves appeared during 1983.

Both the U.S. Senate and the House of Representatives adopted resolutions designating December 12-18, 1982 as "National Drunk and Drugged Driving Awareness Week." We held a ceremony on Capitol Hill during the awareness week launching the LBIC-OAAA public service billboard project.

During that awareness week itself the LBIC initiated a nationwide public service radio and TV campaign, featuring the theme "Friends Don't Let Friends Drive Drunk." This theme, which originated with the Department of Transportation, stresses the vital importance of intervening to save lives before the impaired driver gets behind the wheel.

LBIC conducted the campaign again in 1983. Transportation Secretary Elizabeth Dole endorsed the effort, which got underway during the 1983 December holiday season. For the second year, the Outdoor Advertising Association joined LBIC in conducting this nationwide billboard campaign. Radio announcements were distributed to 1200 stations and television PSA's to more than 400 stations.

The LBIC was originally formed to help educate the public on an entirely different subject - the problems associated with drinking and pregnancy. Ten alcohol beverage industry associations responded to a 1978 study by the Department of Treasury to help increase awareness among the public in this area.

In the intervening years, several government surveys have measured the results of those programs which have involved all media and targeted both the general public and health professionals especially those working in public health clinics. The latest polls have found that over 80 percent of the public is aware of the possible dangers of drinking for expectant women and over two-thirds of pregnant women abstain throughout the nine months before they give birth. The Federal government now classifies (Fifth Special Report to the U.S. Congress on Alcohol and Health, December 1983, p. 5) only 2 percent of pregnant women as moderate to heavy drinkers, that is those who drink at least one-quarter of an ounce of ethanol per day (equivalent 6 ounces of beer, 2 ounces of table wine, or half of a mixed drink containing 1½ ounces of distilled spirits).

While the LBIC is a public education program conducted by America's alcohol beverage industry, as noted above, we work closely with governmental agencies. For example, on December 21, 1981, the U.S. Department of Health and Human Services issued a press release commending the initiation of the LIBC phase II program. In the release Dr. Edward N. Brandt, Jr., Assistant Secretary for Health, described the new campaign as "an example of private sector participation in an important health education program.

In a statement made on February 24, 1982, before the Senate Subcommittee on Alcoholism and Drug Abuse, Dr. Carlton E. Turner, Senior Policy Advisor for Drug Policy at the White House, made favorable reference to the LBIC.

On the same date and before the same senate subcommittee, Dr. William Mayer, Administrator of the Alcohol, Drug Abuse, and Mental Health Administration, described the LBIC Program in considerable detail and with approval.

On September 13, 1982, in a speech before the Distilled Spirits Council of the United States, John M. Walker, Jr., Assistant Secretary of the Treasury (enforcement and operations) stated:

> "I am pleased to see that, as is usually the case, your industry is playing a leadership role in responding to this problem (drunk driving) without prodding from the federal government..."

The LBIC received international as well as national recognition as a model of private sector participation in an important public education program. For example, in June, 1982, the LBIC Chairman participated in a symposium on alcohol, health and society in Amsterdam. Also, we have received inquiries from government agencies, universities and industry associations in other countries. The medical teaching/FAS intervention model generated by Dr. Henry Rosett has been adopted by the government of Sweden (and the state of Massachusetts).

Since the LBIC takes an open-ended approach in its program planning, our activities on these three alcohol abuse issues will continue. We recognize the continuing nature of public education needs, as well as the variety of media messages and qualified agencies required to do this multi-faceted job. Both the teenager and adult drinkers must have distinctively tailored appeals from sources offering credible, factual information. We are now exploring further opportunities for TV and print messages.

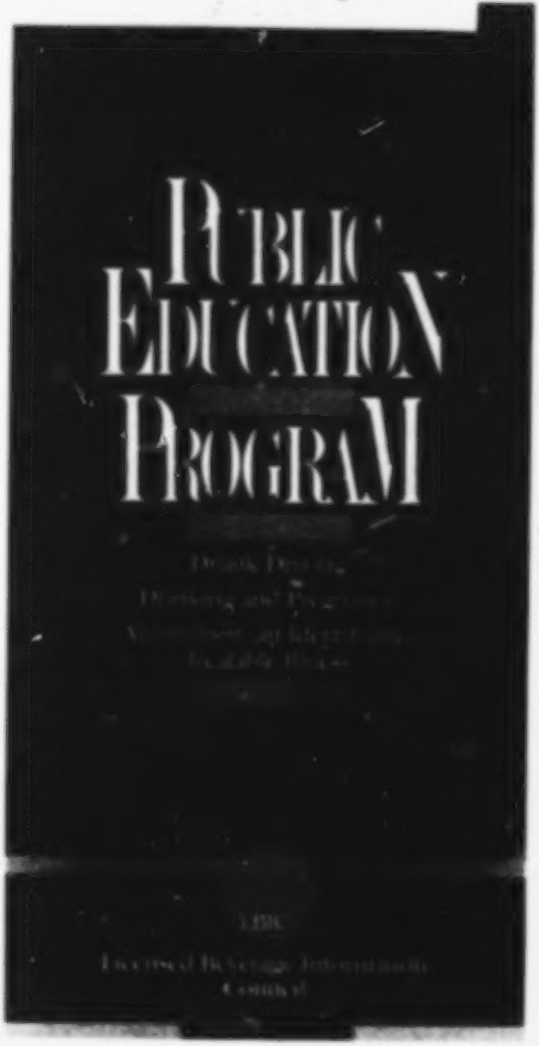
The LBIC also realizes the need to change societal attitudes so that excessive drinking is no longer perceived as acceptable behavior. Our platform and plans support this objective.

Today, elected officials and other leaders are in assessing possible solutions to problems generated by drunk drivers and other alcohol abusers. These are important issues deserve both careful attention and considered responses.

Members of the Licensed Beverage Information Council concur with research, traffic safety and health experts who believe that effective and responsible programs of public education constitute an infinitely more workable solution than "creeping prohibition".

ooooooooo

EXHIBIT 1



PUBLIC EDUCATION PROGRAM

Drunk Driving

Drinking and Pregnancy

[illegible]

[illegible]

LBIC

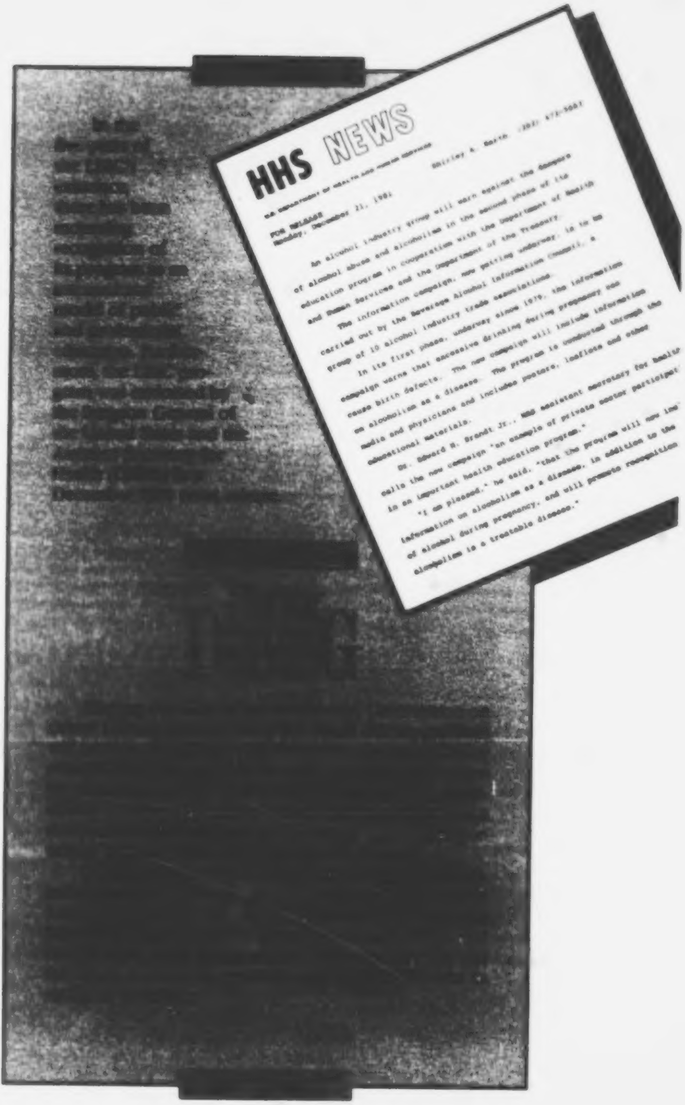
Licensed Beverage Information Council

PLATFORM STATEMENT

There is a continued widespread concern about the health effects of abusive drinking by women during pregnancy. There also is public misunderstanding of the causes and nature of alcoholism. From a public education standpoint this complex illness has experienced neglect in recent years. It is vital to restore fundamental attention to this disease.

The U.S. Government's call for a broad education program, communicating accurate information to the public about abusive drinking, deserves the widest possible support from the private sector, particularly the alcohol beverage industry at all levels.

Information communicated to the public should be based on objective appraisals of the latest scientific research findings. Personal opinion should be identified as such. A wide range of communications techniques is being used to carry the LBIC message to the largest number of Americans.



HHS NEWS

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

FOR RELEASE
Monday, December 21, 1981

Shirley A. Barth (202) 472-5663

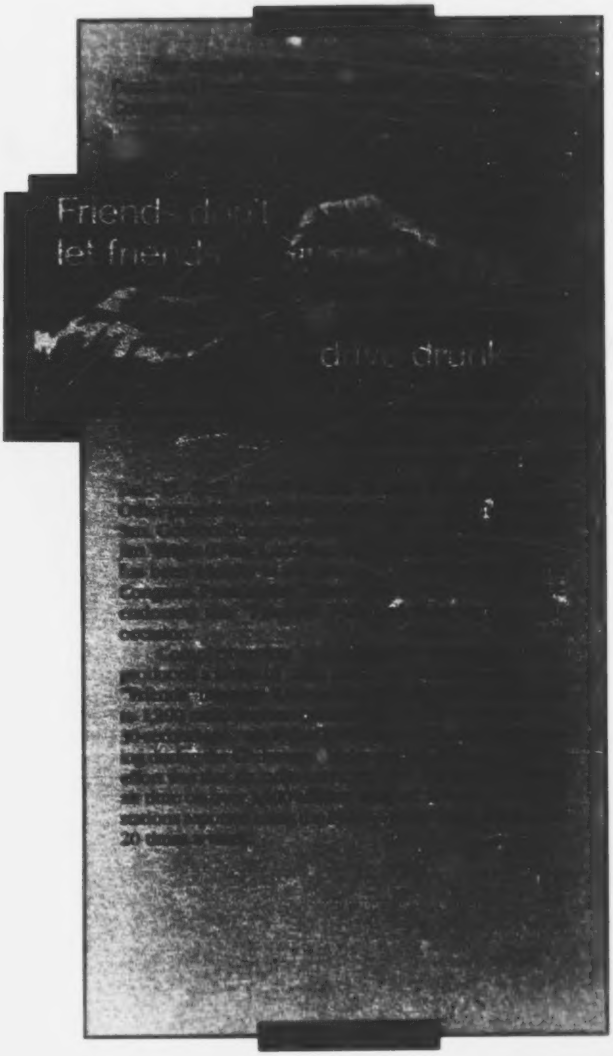
An alcohol industry group will warn against the dangers of alcohol abuse and alcoholism in the second phase of its education program in cooperation with the Department of Health and Human Services and the Department of the Treasury.

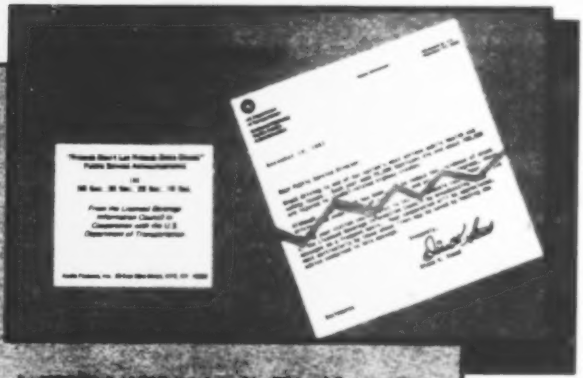
The information campaign, now getting underway, is to be carried out by the Beverage Alcohol Information Council, a group of 10 alcohol industry trade associations.

In its first phase, underway since 1979, the information campaign warns that excessive drinking during pregnancy can cause birth defects. The new campaign will include information on alcoholism as a disease. The program is conducted through the media and physicians and includes posters, leaflets and other educational materials.

Dr. Edward N. Brandt Jr., HHS assistant secretary for healt calls the new campaign "an example of private sector participat in an important health education program."

"I am pleased," he said, "that the program will now inc information on alcoholism as a disease, in addition to the of alcohol during pregnancy, and will promote recognition alcoholism is a treatable disease."


Friends don't
let friends
drive drunk

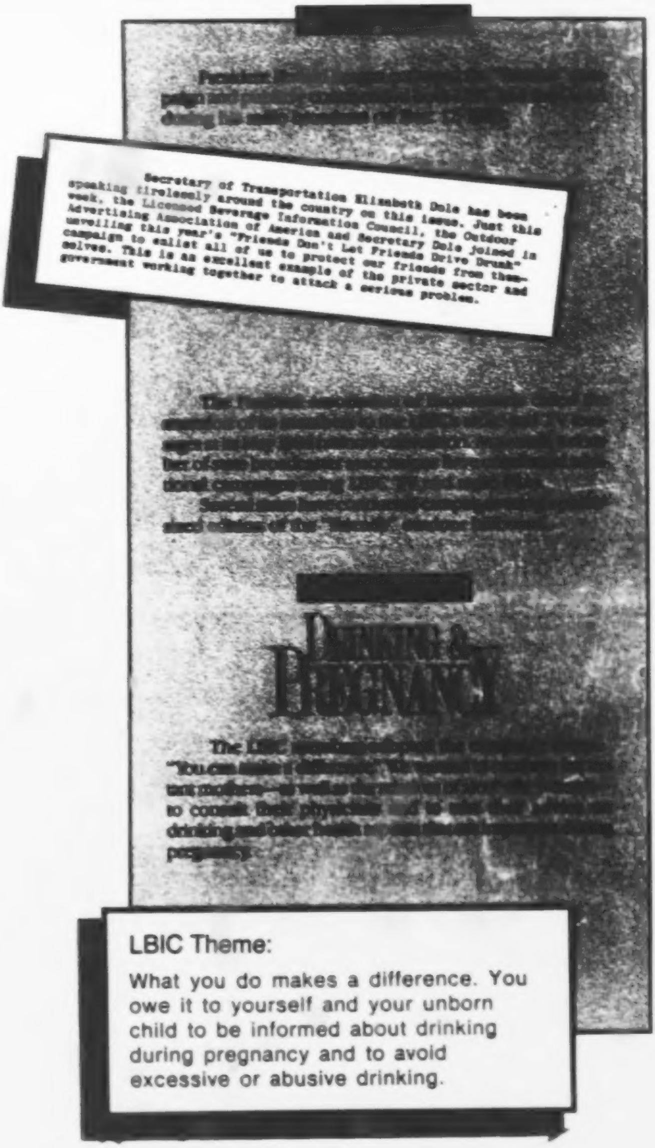


"Friends Don't Let Friends Drive Drunk"
Public Service Announcements
60 Sec. 30 Sec. 20 Sec. 10 Sec.
From the Licensed Beverage Information Council in Cooperation with the U.S. Department of Transportation

In 1983-84 the LBIC continued its "Friends" campaign. Three thousand billboards were again distributed to outdoor advertising firms for posting, beginning with the end of the 1983 holiday season. This phase of the campaign continued through the summer of 1984. To broaden its reach with broadcast stations, LBIC prepared a 30-second television spot as a complement to the public service radio spots. The TV spot was distributed to 400 stations covering the top metropolitan area markets around the country. Based on return post cards, which provide a conservative underestimate of actual usage, about 25 million viewers have seen the TV PSA. In addition, 15 million listeners were reached by airing the radio spot.

The 1983-84 "Friends" campaign was endorsed by U.S. Secretary of Transportation Elizabeth Hanford Dole in a kickoff ceremony Dec. 14, 1983, at DOT headquarters in Washington, D.C.

Shown left to right: [illegible], Chairman of LBIC; Elizabeth Hanford Dole, Secretary of Transportation; Vernon Clark, President of the Outdoor Advertising Association of America.



President [illegible]

[illegible]

during his [illegible]

Secretary of Transportation Elizabeth Dole has been speaking tirelessly around the country on this issue. Just this week, the Licensed Beverage Information Council, the Outdoor Advertising Association of America and Secretary Dole joined in unveiling this year's "Friends Don't Let Friends Drive Drunk" campaign to enlist all of us to protect our friends from themselves. This is an excellent example of the private sector and government working together to attack a serious problem.

The [illegible]

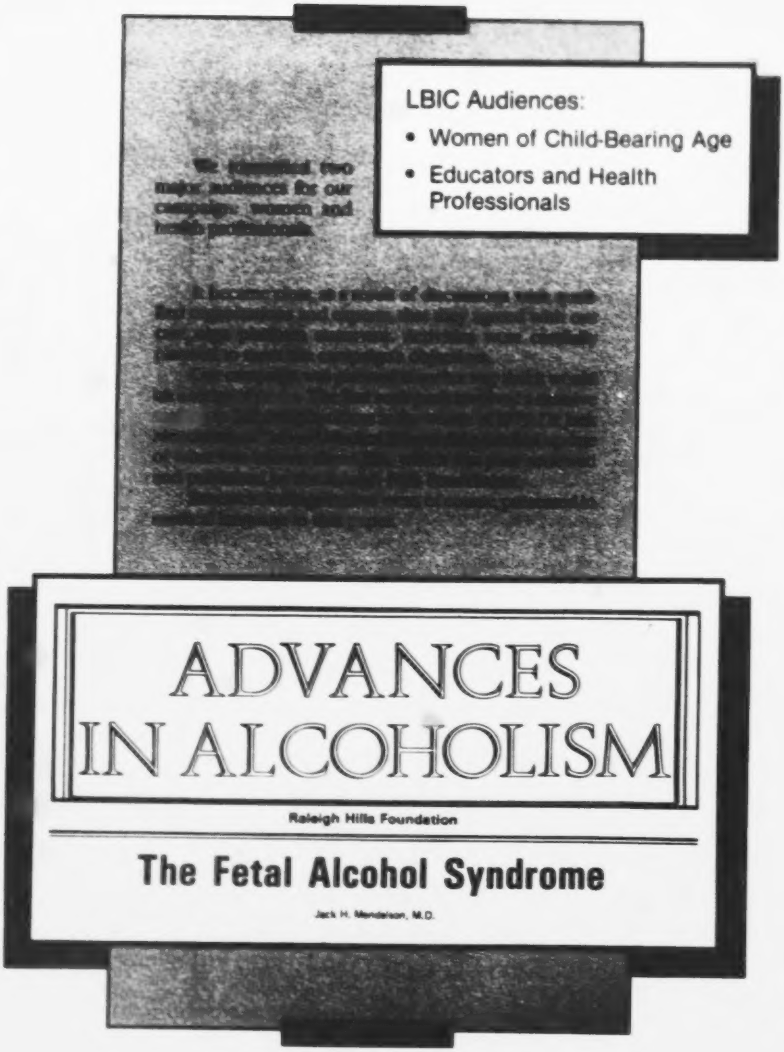
[illegible]

DRINKING & PREGNANCY

The LBIC [illegible] "You can make a difference" [illegible] [illegible] mothers—as well as [illegible] to consult their physician [illegible] drinking and other [illegible] pregnancy.

LBIC Theme:

What you do makes a difference. You owe it to yourself and your unborn child to be informed about drinking during pregnancy and to avoid excessive or abusive drinking.



LBIC Audiences:

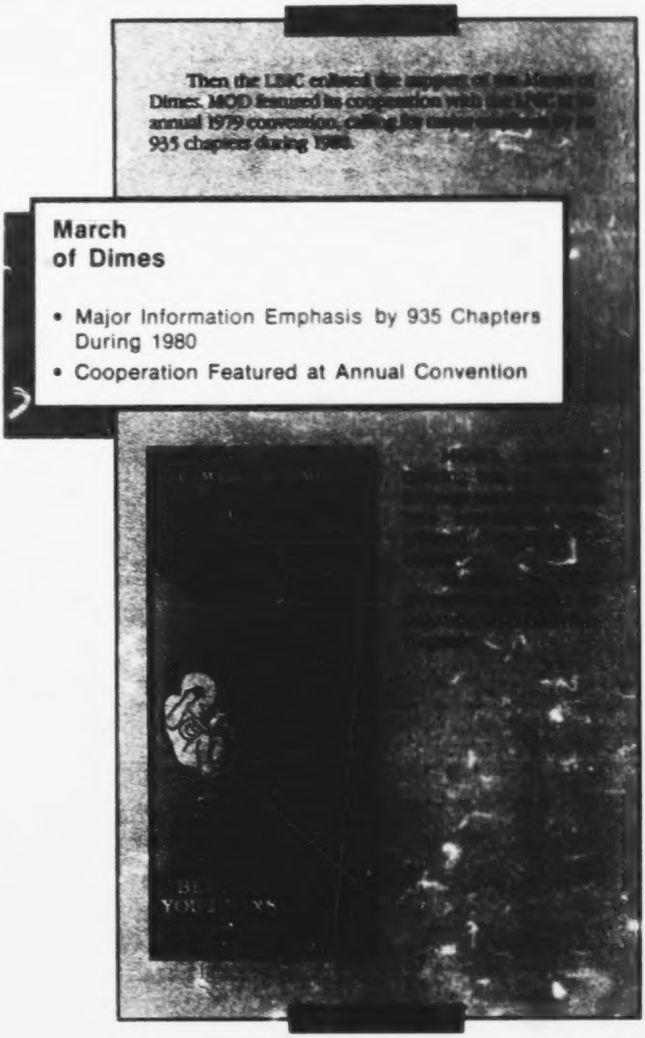
- Women of Child-Bearing Age
- Educators and Health Professionals

ADVANCES IN ALCOHOLISM

Raleigh Hills Foundation

The Fetal Alcohol Syndrome

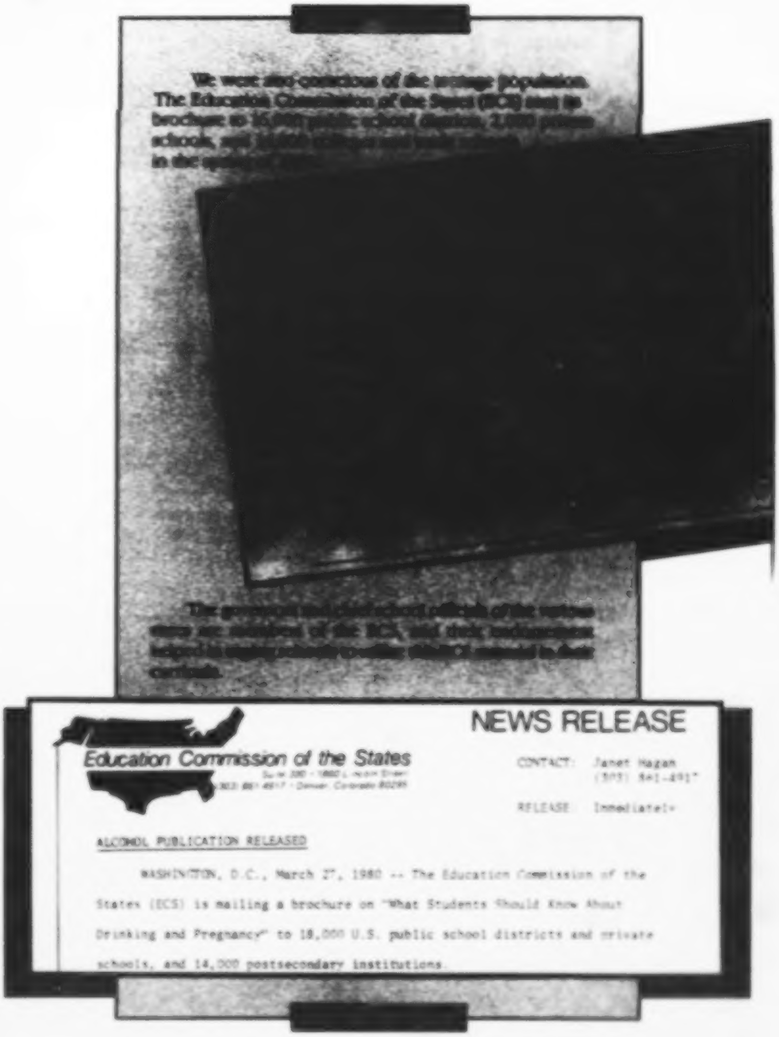
Jack H. Mendelson, M.D.



Then the LBIC enlisted the support of the March of Dimes. MOD featured its cooperation with the LBIC at its annual 1979 convention, calling for major emphasis by its 935 chapters during 1980.

March of Dimes

- Major Information Emphasis by 935 Chapters During 1980
- Cooperation Featured at Annual Convention



We were also conscious of the [illegible] population. The Education Commission of the States (ECS) sent its brochure to 16,000 public school districts, 2,000 private schools, and [illegible] in the spring [illegible]

The governors and chief school officers of the various states are members of the ECS, and their endorsement helped [illegible] curricula.

NEWS RELEASE

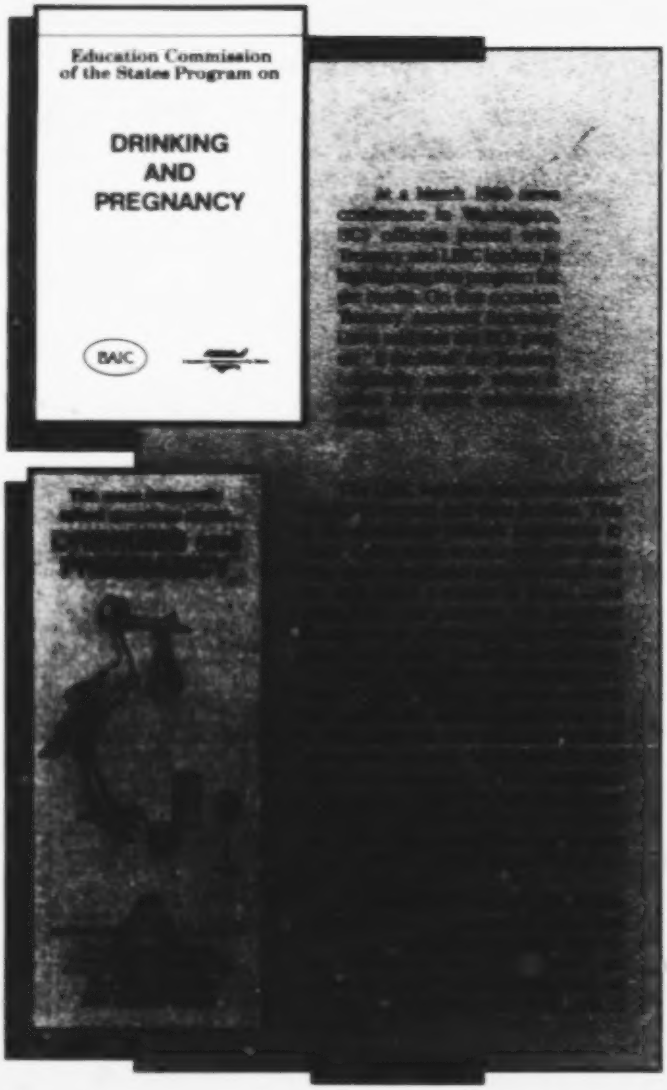
Education Commission of the States
Suite 300 · 1860 Lincoln Street
(303) 861-4917 · Denver, Colorado 80295

CONTACT: Janet Hagan
(303) 861-4917

RELEASE: Immediately

ALCOHOL PUBLICATION RELEASED

WASHINGTON, D.C., March 27, 1980 -- The Education Commission of the States (ECS) is mailing a brochure on "What Students Should Know About Drinking and Pregnancy" to 18,000 U.S. public school districts and private schools, and 14,000 postsecondary institutions.



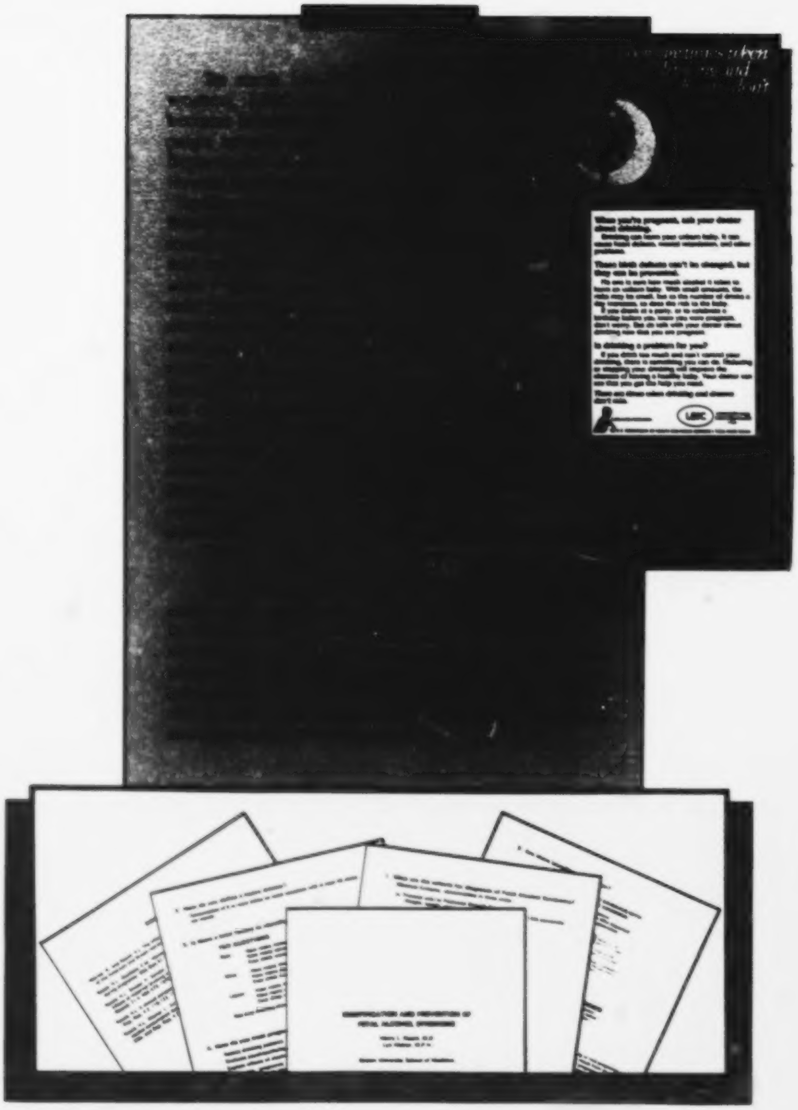
Education Commission
of the States Program on

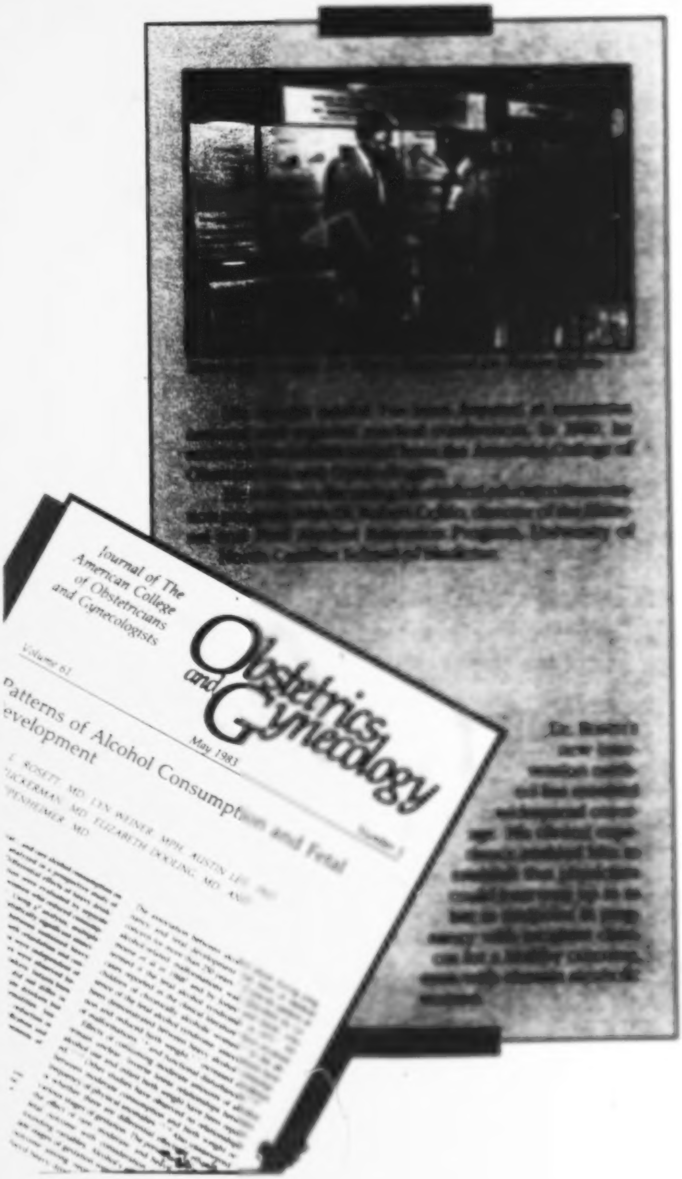
DRINKING
AND
PREGNANCY

BAIC

At a March 1980 press conference in Washington, ECS officials joined with Treasury and LBIC leaders in highlighting this program for the media. On that occasion, Treasury Assistant Secretary [illegible]

[illegible]





Journal of The
American College
of Obstetricians
and Gynecologists

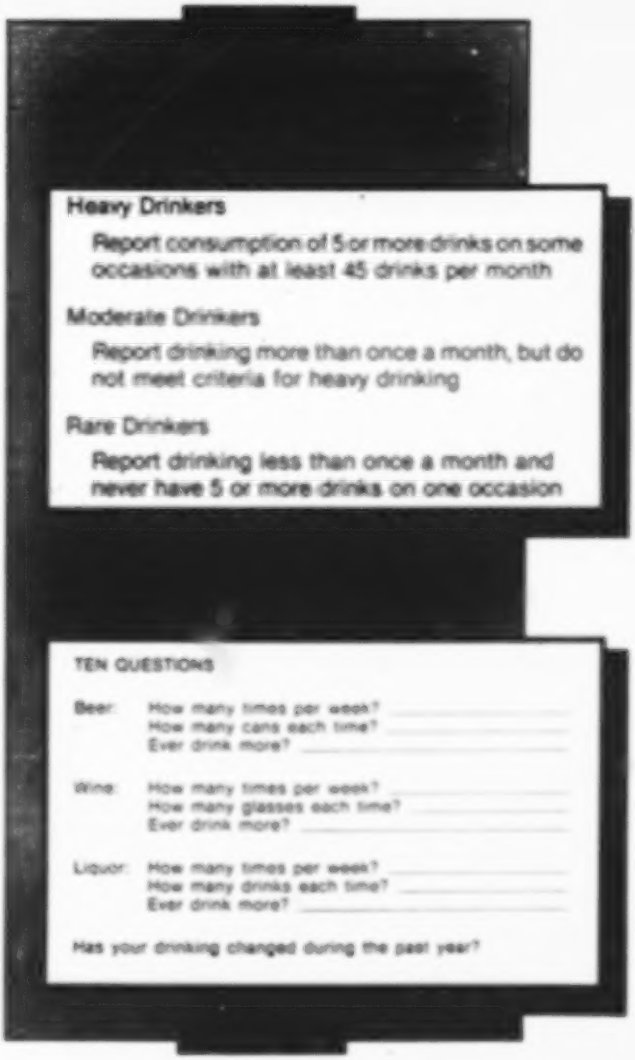
Obstetrics and Gynecology

Volume 61

May 1983

atterns of Alcohol Consumption and Fetal
evelopment

L. ROSETT, MD, LYN WEINER, MPH, AUSTIN LEE, PhD,
UCKERMAN, MD, ELIZABETH DOOLING, MD, AND
PENHEIMER, MD



Heavy Drinkers

Report consumption of 5 or more drinks on some occasions with at least 45 drinks per month

Moderate Drinkers

Report drinking more than once a month, but do not meet criteria for heavy drinking

Rare Drinkers

Report drinking less than once a month and never have 5 or more drinks on one occasion

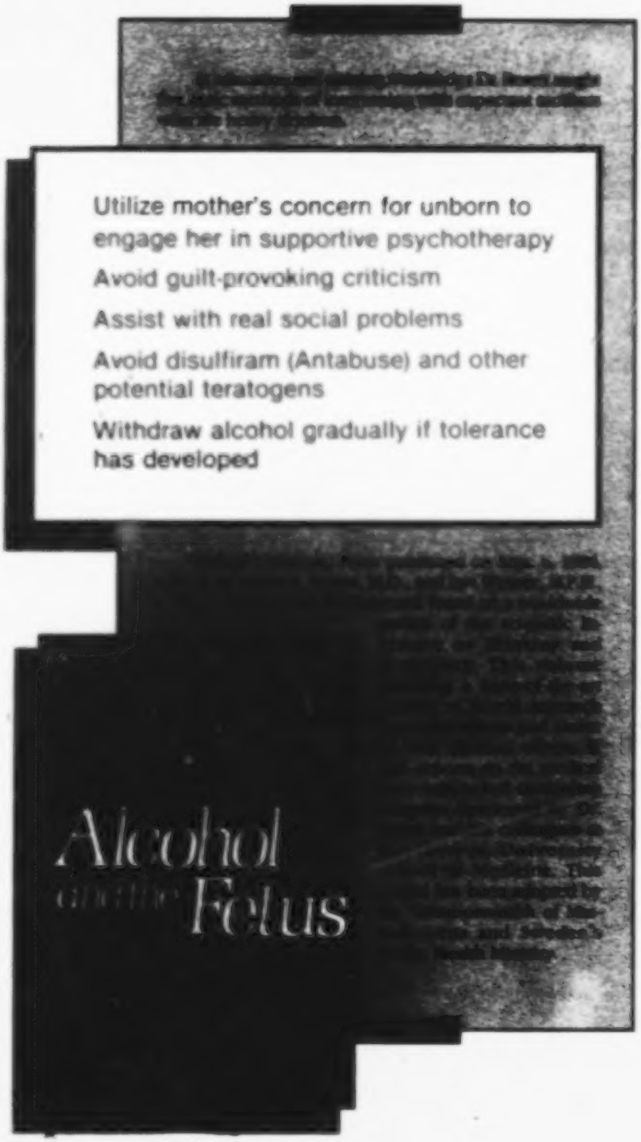
TEN QUESTIONS

Beer: How many times per week? ____________
How many cans each time? ____________
Ever drink more? ____________

Wine: How many times per week? ____________
How many glasses each time? ____________
Ever drink more? ____________

Liquor: How many times per week? ____________
How many drinks each time? ____________
Ever drink more? ____________

Has your drinking changed during the past year?



Utilize mother's concern for unborn to engage her in supportive psychotherapy

Avoid guilt-provoking criticism

Assist with real social problems

Avoid disulfiram (Antabuse) and other potential teratogens

Withdraw alcohol gradually if tolerance has developed

Alcohol and the Fetus

DRINKING and PREGNANCY

Liquor industry warns of fetal alcohol

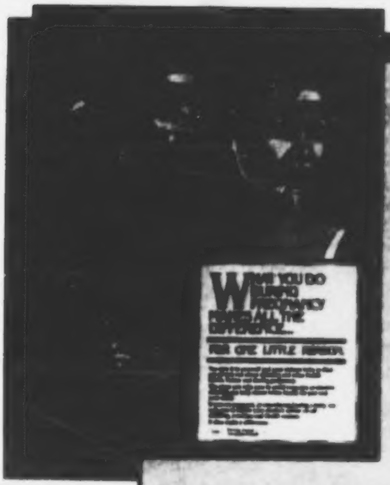
Alcoholic Beverage Industry To Launch Major Educational Campaign on the Effects of Drinking on Unborn Children

Alcohol info drive set for mothers-to-be

Alcohol industry warns moms-to-be

U.S. JOURNAL

Alcohol industry gears

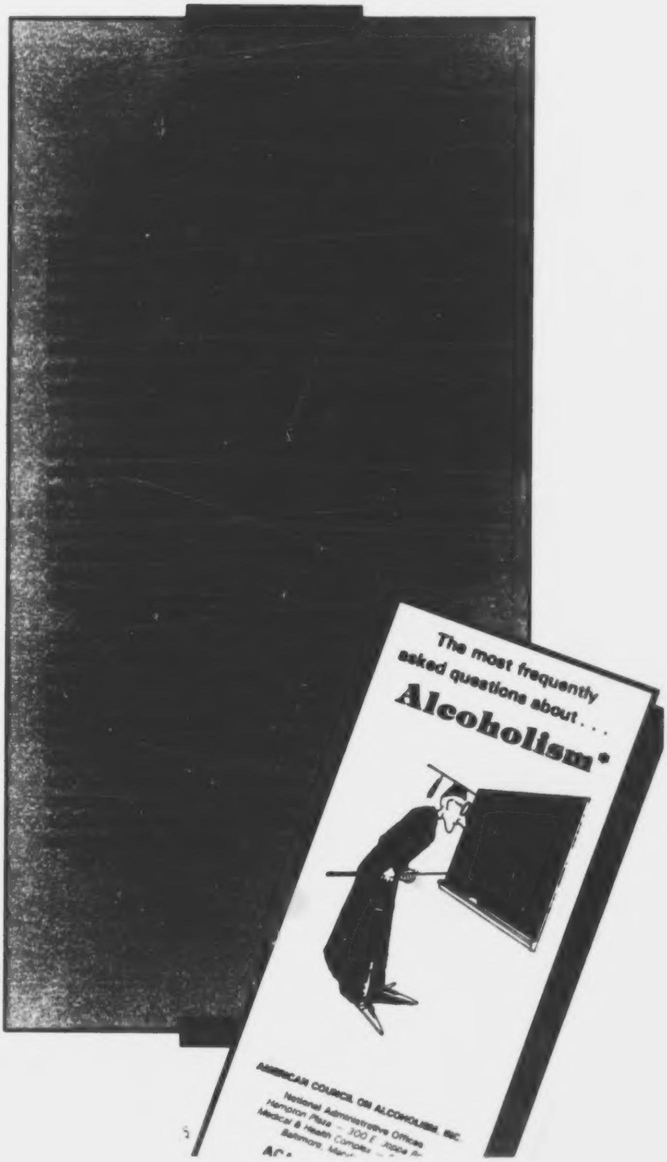


The LBIC poster, now in its fourth printing, has been widely used by a variety of government and private health organizations.

The poster features a Hispanic woman and a black woman for two specific reasons. First, two national surveys of women sponsored by the Treasury Department showed that low-income, minority women had the lowest degree of awareness of this problem. Second, LBIC recognized the need to reach these populations.

Radio tapes were sent to 1,500 radio stations. They featured a series of interviews with Drs. Mendelson and Rosett, as well as separate statements for the March of Dimes, Education Commission of the States, and the American Council on Alcoholism.

Three TV public service messages were produced and delivered to TV stations throughout the country, as well as the three major TV networks. These three messages were sponsored in cooperation with the Bureau of Alcohol, Tobacco, and Firearms. One message, in Pan-Hispanic, was delivered to stations serving large Hispanic populations. A Pan-Hispanic panel was consulted on the TV messages and the campaign poster so that they would be understandable to the three different Spanish populations in this country.



The most frequently asked questions about . . .

Alcoholism*

AMERICAN COUNCIL ON ALCOHOLISM, INC.

National Administrative Offices
Hampton Plaza — 300 E. Joppa R
Medical & Health Complex —
Baltimore, Mar
AC

For Women in the Workplace

The [illegible] gram, [illegible] about [illegible] support [illegible] beverage [illegible]

The [illegible] was organ[illegible] research [illegible] be offered [illegible]

Drunk[illegible] can [illegible] should be [illegible]

The [illegible]

The [illegible] and [illegible] potential [illegible] years [illegible] able [illegible]

[illegible] based on [illegible] Personal [illegible] of commun[illegible] LBC [illegible]

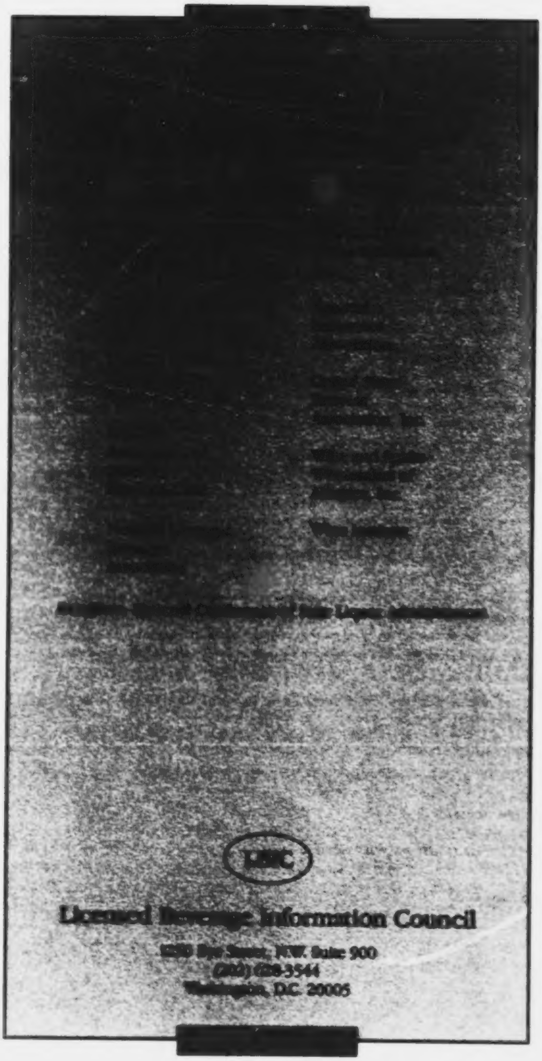
The [illegible] need for [illegible] sources.

The [illegible] in educating [illegible]

- Driving [illegible] "Friends [illegible] has a social [illegible] and that of others [illegible] must be encouraged among the public.

- [illegible] consult their physicians on the [illegible] during pregnancy. [illegible] than most women who [illegible] and other activities during [illegible] alcohol beverages sparingly. [illegible] alcoholic women, inter- [illegible] carefully applied up to mid- [illegible] this area offers a message of hope [illegible]
- [illegible] and treatable illness. Scien- [illegible] genetic, and psychosocial fac- [illegible] of this disease. There [illegible] Most alcoholics are [illegible] or contemporary diagnosis [illegible] families should be made [illegible] and support serv- [illegible] is a message of hope.
- [illegible] the following terms are [illegible] "problem drinking" [illegible] used in the health [illegible] varies for these subjects.
- [illegible] populations to be educated [illegible] involved, the [illegible] will [illegible] group and multi-media [illegible] of drinking and driving, drink- [illegible] and the illness of alcoholism.

[illegible] is a consortium of eleven trade [illegible] non-affiliated companies which sponsor [illegible] professional education programs [illegible]



Wine and Spirits Wholesalers of America, Inc.

Wine Institute

[illegible]

LBIC

Licensed Beverage Information Council

1250 Eye Street, N.W. Suite 900
(202) 628-3544
Washington, D.C. 20005

U.S. House of Representatives
SELECT COMMITTEE ON
CHILDREN, YOUTH, AND FAMILIES
385 House Office Building Annex 2
WASHINGTON, DC 20515

May 17, 1985

The Honorable Howard E. Duvall
Mayor
P.O. Box 111
Cheraw, South Carolina 29520

Dear Mayor Duvall:

This is to express my personal appreciation for your appearance before the Select Committee on Children, Youth, and Families at the hearing held jointly by the Prevention Strategies and Crisis Intervention Task Forces on May 2, concerning prevention of alcohol abuse. Your participation contributed greatly toward making the hearing a success.

The Committee is now in the process of preparing the transcript of the hearing for publication. It would be helpful if you would go over the enclosed copy of your testimony to make sure it is accurate, and return it to us within three days with any necessary corrections.
Also, Mrs. Boggs would appreciate the following question being answered for the record:

> You mention in your testimony that Cheraw regularly lost teenagers to drunk driving accidents before you initiated the four-part program you now have in your community. Since the program got started two years ago, have any alcohol-related fatalities occurred among Cheraw's teenagers?

Let me again express my thanks, and that of the other members of the Select Committee for your testimony.

Sincerely,

GEORGE MILLER
Chairman
Select Committee on Children,
Youth, and Families

Enclosure

The Town of Cheraw

May 22, 1985

MAY 28 1985

Representative George Miller, Chairman
Select Committee on Children, Youth
and Families
385 House Office Building Annex 2
Washington, D.C. 29515

Dear Representative Miller:

RE: Transcript
"Prevention of Alcohol Abuse in American Families"

Thank you for allowing me to appear before the Select Committee on Children, Youth and Families on May 2nd to speak on what we are doing in Cheraw, South Carolina. Per your request I am returning the transcript with a couple of minor corrections.

In your letter of May 17, 1985 you had indicated that Mrs. Boggs wanted to know whether or not there had been any alcohol-related fatalities among Cheraw's teenagers since the Town had initiated its program on alcohol and drug abuse. The Town was very successful for two (2) years after I had formed the Mayor's Task Force on Alcohol and Drug Abuse, however, in February of this year we lost a nineteen year old male who died of alcohol poisoning after drinking too much alcohol at a local private party.

We do feel that the Town of Cheraw is making people and teenagers aware of the dangers involved in alcohol and drugs and it is our commitment to provide alternative recreational opportunities for these young people in an effort to provide a clean and healthy environment for them so that they can remain out of trouble.

Again let me express my thanks for allowing me to participate before this select committee. I look forward to receiving a copy of the completed publication.

Very truly yours,

Howard E. Duvall, Jr.
Howard E. Duvall, Jr.
Mayor

HEDjr./em
Enclosure

Phone (803) 537-7283 P.O. Box 111 Cheraw, S.C. 29520

1771 N Street, N.W.
Washington, D.C. 20036

John B. Summers
Executive Vice President
(202) 429-5302
(800) 424-8806

National Association of Broadcasters

May 16, 1985

The Honorable George Miller
Chairman
Select Committee on Children,
Youth and Families
238 House Annex II
Washington, DC 20515

Dear Mr. Chairman:

Enclosed, please find a statement of the National Association of Broadcasters (NAB) supplementing testimony provided to the Select Committee at its hearing on May 2, 1985.

Members of the Committee requested additional views of the NAB concerning the existence of any link between advertising of beer and wine on radio and television and alcohol abuse, particularly among our youth.

I want to tell you that we appreciate the efforts of your staff, in particular Marsha Mabee and Alan Stone.

Thank you for this opportunity.

Sincerely,

John B. Summers

John B. Summers

STATEMENT

OF

NATIONAL ASSOCIATION OF BROADCASTERS

BEFORE

THE SELECT COMMITTEE ON CHILDREN, YOUTH AND FAMILIES

UNITED STATES HOUSE OF REPRESENTATIVES

MAY 2, 1985

INTRODUCTION

The National Association of Broadcasters is a trade association representing over 4,500 radio and 800 television stations, including all the major networks and groups.

We appreciate the opportunity to submit this statement detailing the contributions of the broadcasting industry to the prevention of alcohol-related family problems, into the Hearing Record of the Select Committee on Children, Youth and Families.

NAB shares this Committee's concern for the tremendous pain that alcohol and drug abuse inflicts upon American children and families. This hearing, to explore methods of preventing alcohol misuse in the family, is an important step toward mitigating this national tragedy.

THE BROADCAST EFFORT AGAINST ALCOHOL MISUSE IS EXTENSIVE

Broadcasters, who are licensed by the Communications Act of 1934 to serve the interests of their local communities, have for many years led the efforts to inform the public of the dangers of alcohol and drug abuse. The growing national concern for these problems has been amplified and publicized by broadcasters in their local news stories, editorials, full-length public affairs programs and public service announcements (PSA's).

In addition to their programming activities, broadcasters serve on civic boards devoted to fighting drunk driving and sponsor community services such as "designated driver", "dial a ride" and "tipsy taxi" programs in conjunction with groups such as Mothers Against Drunk Drivers (MADD) and Students Against Driving Drunk (SADD).

Broadcasters' efforts have been saluted by Transportation Secretary Elizabeth Dole, the Presidential Commission on Drunk Driving, and most recently by Candy Lightner, President of MADD, at NAB's Annual Convention in April, 1985. Candy Lightner has joined with NAB in producing public service announcements to promote NAB's alcohol awareness campaign. These tributes illustrate the breadth of our industry's involvement in programming and non-programming activities to combat alcohol and drug abuse.

The extent of broadcasters' independent efforts in the fight against alcohol and drug abuse is impressive. Last year NAB conducted a survey of radio and television stations which revealed that:

0 Ninety two percent of those stations responding to the survey reported airing alcohol-related public service announcements during the period from April to September, 1984

0 Half of all responding stations have produced their own locally-oriented PSA's for broadcast;

0 Over eighty percent have aired news stories about alcohol-related problems, such as drunk driving accidents, on their local newscasts;

0 Over two thirds have produced their own full-length alcohol related public affairs show;

0 Forty percent have participated in a variety of alcohol related community activities in addition to their programming activities.

Over a year ago the broadcasting industry, through the NAB, mounted a coordinated national campaign to stimulate the American public toward seeking long-term solutions to the problems caused by misuse of alcohol. In January, 1984, NAB formed a national Alcohol and Drug Abuse Task Force to encourage and coordinate the broadcasting industry's activities in combating alcohol and drug abuse. Soon thereafter, nearly every state broadcast association established a state task force to foster state-level broadcast activity.

NAB has established a clearinghouse for the collection and dissemination of alcohol-related programming ideas and activities. The Association has begun a regular monthly satellite feed of ideas and information from this clearinghouse to our industry. To date, the clearinghouse has received over 1,000 contributions and requests for information about anti-drunk driving campaigns. On December 3, 1984, NAB distributed by satellite 32 anti-drunk driving and drug abuse PSA's to all member and non-member television stations for use during National Drunk and Drugged Driving Awareness Week (December 9-16) and throughout the holiday season.

State associations have produced and circulated for broadcast, PSA's in conjunction with local chapters of MADD, SADD, PTA, business and other civic groups. The associations have also organized awareness campaigns with allied industries such as restaurant and automobile associations. In Washington, D.C., the Washington Regional Alcohol Program (WRAP, composed of representatives from the Capital Centre, local broadcasters, automobile, insurance, local tavern and restaurant owners) produced the designated driver and dial-a-ride programs we witnessed during the recent holiday season. WRAP plans additional publicity campaigns throughout the year.

Federal state and local officials have acknowledged the contributions of broadcasters:

0 During the 1983 Christmas holiday season there was not a single alcohol-related highway fatality in Washington, D.C.. Area officials cited media exposure as a possible factor.

0 Last July, the Iowa Department of Transportation reported that alcohol-related traffic fatalities had declined by more than

0 Last July, the Iowa Department of Transportation reported that alcohol-related traffic fatalities had declined by more than one-half for the first half of 1984 and praised the media for exposure given to law enforcement efforts in that state.

0 Authorities in Johnstown, Pennsylvania, which experienced not a single drunk driving fatality during the holiday season and commended the media exposure of the problem of drunk driving.

0 The State of Washington Traffic Safety Commission announced on January 8, 1985, that during the period between December 24, 1984 and January 2, 1985, there was not one alcohol-related traffic fatality in that state. The Commission's director stated that "the media's commitment to the drunk driving issue defies measurement."

0 On January 28, 1985, Illinois Secretary of State Jim Edgar told Illinois broadcasters that "your news coverage, educational support and broadcast of PSA's have all contributed to a change in attitude among drivers, legislators, young people, police and others. Although our work is far from done, highways in Illinois are safer today, and you deserve a share of that credit."

THE BROADCAST COMMITMENT IS GROWING

Future efforts of broadcasters in the fight against alcohol and drug abuse will be even greater. At its January, 1985, Board meeting NAB announced the commencement of an industry-wide campaign urging broadcasters to pledge airtime to educate the public about these problems. The Association will be distributing pledge cards to all broadcasters for specific amounts of airtime including public service announcements, editorials, public affairs and other forms of programming devoted to the problems of alcohol misuse.

NAB is also implementing an ambitious campaign aimed at high school graduation, "Operation Prom/Graduation." In this project, NAB has fed youth-oriented PSA's, the best of what it has collected from around the country, to radio and television stations. Additionally, broadcasters, with help from Students Against Driving Drunk (SADD) and representatives from the automobile dealers, florist, restaurant and soft drink industries are assisting high school seniors around the country in planning and hosting non-alcoholic high school graduation celebrations. NAB has developed and distributed a student planning guide to assist in planning the celebrations. Through this program, students are receiving not only some strong reminders about the possible consequences of irresponsible graduation celebrations, but, perhaps more important, a variety of non-alcoholic alternative means of enjoying their graduation celebrations.

BEER AND WINE ADVERTISING AFFECTS BRAND PREFERENCE AND NOT VOLUME OF DRINKING

Broadcasters' contributions in the fight against alcohol abuse are a response to their obligations under the public interest standard of the Communications Act to address serious concerns of their local communities in their programming. Moreover, credible scientific evidence demonstrates no causal link between advertising and alcohol abuse. Thus, it does not follow that broadcasters who air responsible advertisements for alcoholic beverages bear responsibility for alcohol abuse. Nor does the airing of alcohol advertising generate an obligation by broadcasters to air counter-advertisements.

Broadcast advertising does not encourage people to misuse alcohol. The market for products such as beer and wine is mature and stable; brewers and vintners use broadcast advertising in hopes of influencing a consumer's decision of which brand of beverage to drink. They compete for market shares among consumers of beer and wine largely with marketing programs that include broadcast, print and outdoor advertising as well as sponsorship of sporting events and other popular attractions. Brewers have noted that a shift of as little as 1 per cent of the market from one brand to another amounts to $380,000,000 in sales.

Government agencies and private groups have devoted many years and millions of dollars to the scientific investigation of alcohol misuse and its related social problems, including the question of whether alcohol beverage advertising encourages misuse of alcohol. Alcohol consumption and abuse patterns can be related to a complex set of sociological, psychological, physiological and genetic factors. Compared to influences such as physiological imbalances, family experiences, or peer influences, mass media exposure is generally considered to be among the weakest or non-existent influences on alcohol consumption, to say nothing of misuse, which is the real focus of this hearing. The Federal Trade Commission (FTC), reviewing a petition to ban or otherwise restrict alcohol advertising, found, after an exhaustive analysis of the scientific literature, "...no reliable basis on which to conclude that alcohol advertising significantly affects alcohol abuse..." (see Appendix A). Thus, credible scientific research supports the view that otherwise responsible broadcast alcohol advertisements, in and of themselves, do not significantly affect alcohol consumption or abuse.

BROADCASTERS ENSURE THAT ALCOHOL RELATED PROGRAMMING AND ADVERTISING IS APPROPRIATE AND NONDECEPTIVE

Broadcasters, who are responsible for the programming and advertising that is aired over their stations, exercise that responsibility to ensure that all programming is appropriate, tasteful and non-deceptive. For example, the major networks individually maintain extensive commercial standards departments that carefully screen each advertisement for appropriateness before airing. Advertisements that, in any expressed or implied way encourage misuse of beer or wine are rejected. Few, if any, beer, or wine ads are produced for national or regional use unless they meet the individual network's standards. Moreover, the station groups and individual stations maintain their own scrutiny of beer and wine ads, particularly those produced for local use which do not come under the review of the network standards divisions.

In rare instances questionable advertisements may have been broadcast. In fact, the opponents of beer and wine advertising consistently point to a very small number of ads in their criticism of all beer and wine advertising, mostly advertisements that are no longer on the air. It is to the credit of these standards departments that when valid complaints about advertisements are received, action is taken. Through the individual actions of responsible broadcast licensees, the vast majority of beer and wine advertisements are appropriate and in good taste.

Despite the lack of credible evidence linking alcohol advertising and alcohol abuse in any age group, critics continue to claim that millions of teenagers are bombarded by these commercials during late night and sports programming. However, fewer children watch sports and late night programming than any other program category or daypart. Table 1 (see Appendix B) compares the teen-age audiences for six television programming types. The data is drawn purposefully from November, 1984, to include the professional and college football seasons. Sports ratings should be highest during this period. A.C. Nielsen data documents that weekend sports receive the lowest ratings among teenagers. In fact, of all types of televison programming, weekend sports programming has the lowest percentage of teen--agers (aged 12-17) in its audience.

Critics also blame television programming for depicting excessive or glamorous drinking. However, in doing so they can again point only to a very small number of examples in programs. Most importantly, experts note that the research conducted on this issue fails to establish any link between the viewing of drinking scenes and alcohol or drug abuse. As with advertising of beer and wine products, the research demonstrates that family and peer influence, and not drinking scenes in entertainment programming, are the major influences on drinking behaviors.

Despite the lack of causal connection between television programming and alcohol abuse, the Hollywood creative community has become increasingly sensitive to gratuitous use of alcohol in today's television fare. Two years ago, the Caucus of Producers, Writers and Directors examined the manner in which alcohol was being used in programs. In their white paper entitled, "We've Done Some Thinking," the Caucus urged that drinking scenes which are not necessary to the development of the plot or the characters be cut from scripts.

The results have been impressive. Gratuitous drinking scenes have been reduced in such programs as Dallas, Magnum, P.I., and Hunter. Other programs such as Hill Street Blues, Cheers, and Facts of Life, as well as day-time dramas such as All My Children, deal seriously with alcohol-related problems and use reformed alcoholics in leading roles. The Caucus has stated that it will continue to urge the creative community to remain sensitive to the unnecessary use of drinking behavior in television programming.

Thus, with respect to their advertising and programming policies, broadcasters have been willing to hear complaints and to work with groups concerned about alcohol misuse to improve the quality of material broadcast to the public. Continued reliance on these efforts, not a ban on advertising or mandatory counter--advertising, will best serve the public interest.

ADVERTISING BANS ARE INEFFECTIVE AND UNWARRANTED

A ban on beer and wine advertisements will have no effect on the problems caused by alcohol misuse. The rationale for a ban, that beer and wine ads contribute to misuse of alcohol, is simply not supported by the evidence. As noted above, the credible research that has been conducted on this issue finds little or no effect of alcohol advertising on individual levels of consumption or, more importantly, on abusive consumption of alcohol. The FTC, in denying the petition to ban or otherwise restrict broadcast advertising, found "no basis for concluding that rules banning or otherwise limiting alcohol advertising would offer significant protection to the public."

Several European countries, including the entire Soviet Bloc either restrict or ban entirely the advertisement of alcoholic beverages, yet they suffer abuse rates far in excess of the United States. Clearly, the absence of alcohol advertising has not lessened their alcohol-related problems.

The results of the ban on broadcast cigarette advertising also demonstrated the futility of resorting to advertising bans as a means of reducing consumption. Since the ban on broadcast cigarette advertising, overall consumption continues to rise.

Today, the percentage of heavy smokers is greater than ever. Significantly, teens who have never been exposed to broadcast cigarette advertisments continue to smoke at higher levels than would be expected for this age group if broadcast cigarette advertisements actually led to increased smoking. The experience with the ban on cigarette advertising should be evidence enough of the futility of a ban on beer and wine advertising.

Of course, a distinction must be made between cigarettes and alcohol because the Surgeon General's Report of 1964 expressed the consensus of years of medical research demonstrating that consumption of any amount of cigarettes posed a significant health risk to the consumer. In other words, there is no safe way to consume cigarettes. They are inherently dangerous to all consumers. Studies released since the 1964 Surgeon General's Report support this finding and reemphasize the many dangers of cigarettes.

The same cannot be said for alcohol consumption. The consensus of the medical community to date is that no link has been drawn between moderate consumption of beer and wine and any adverse health effects. Beer and wine are not inherently dangerous products. The cost to society of alcohol results from excessive or irresponsible consumption.

MANDATORY COUNTER-ADVERTISING IS ALSO UNWARRANTED

Advocates offer mandatory counter-advertising as an alternative to an outright ban. This also is ill-advised. Such an intrusive policy would stray over the line of proper governmental regulation of the electronic media.

In 1934 Congress established the general standard by which broadcasters are judged in operating on the frequencies to which they have been assigned. That standard is service in the public interest to local communities. The Federal Communications Commission (FCC) enforces that standard through its licensing and review procedures. Most importantly, however, the discretion to determine how best to operate in the public interest was logically and properly left with the broadcaster.

This decentralized system of responsibility, in which daily programming decisions are placed in the hands of broadcasters, respects journalistic First Amendment freedoms and protects the benefits which flow from those freedoms. Neither Congress nor the FCC has sought to dictate selection of PSA's, the choice of which has been the sole prerogative of the broadcaster. As the programming editor, the broadcaster makes these selections based on the needs of the community. As a result of this system, the United States receives the finest broadcast service in the world.

A mandatory counter-advertising requirement would stand this sensible and successful regulatory structure on its head. Such a law would put the FCC and Congress in the role of second-guessing the decisions of thousands of broadcasters all across the nation as to which public service announcement aired at which time period actually best serves the day-to-day needs and interests of their communities.

The precedent set by such a requirement also could be applied to a great many products which, like beer and wine, are not inherently dangerous but whose misuse could have adverse health effects. Such products include automobiles, over-the--counter medical remedies, butter, salt, fast foods and soft drinks. Numerous existing groups would quickly approach Congress with demands for similar counter-advertising legislation. Congress then would be faced with the prospect of dictating major portions of the broadcast day.

The FCC's 1969 decision to treat cigarette advertisements under the Fairness Doctrine produced exactly that result. Advocates urged that the Fairness Doctrine be applied first to automobiles, then other products, and finally to all products. In 1974, the FCC finally admitted the error of its original cigarette decision and issued a ruling that henceforth product advertisements would not trigger Fairness Doctrine obligations unless the ads directly argued positions on controversial issues of public importance.

In rescinding its application of the Fairness Doctrine to ordinary commercial product advertisements, the Commission did not intend or believe that the public would remain uninformed about important consumer issues. The Commission felt that: "the decision to cover these and other matters of similar public concern appropriately lies with individual licensees in the fulfillment of their public interest responsibilities, and should not grow out of a tortured or distorted application of fairness principles to announcements in which public issues are not discussed."

As the Commission has described, broadcasters around the nation have responded to their public interest obligations with an abundance of programming addressing the problems related to alcohol. The public interest will be better served by the public interest doctrine than with a misguided application of the Fairness Doctrine to beer and wine commercials.

Finally, every counter-advertisement Congress might require may reduce the opportunity for airing the many other equally worthy public service messages which do not happen to relate to a product whose misuse may produce adverse health effects. The economic nature of advertiser-supported broadcast programming imposes limits upon the number of public service announcements a broadcaster can carry free of charge. The practical result of a counter-advertising requirement for certain product-related causes would be that exposure for causes such as the Red Cross, multiple sclerosis, or world hunger and disaster relief would be accorded secondary status to those product-related causes such as beer and wine advertising. Clearly, this result would not be in the public interest. The choice of how much airtime to devote to what public service announcement should reside with the broadcaster, who knows the needs and interests of the local community.

CONCLUSION

Broadcasters nationwide have and will continue to contribute meaningfully and substantially to fighting the problems associated with misuse of alcohol. Independently in their local communities and collectively through NAB and the state broadcast associations, broadcasters have demonstrated leadership and commitment in their efforts to promote awareness of the problems of alcohol misuse.

Yet, the broadcasting industry cannot by itself change the attitudes of society toward drugs and alcohol. As providers and communicators of information, we will continue to dedicate ourselves in a multitude of ways, some of which have been outlined in this statement, to the goal of reducing the incidence of alcohol and drug abuse in the home, among young people and in society. However, attainment of this objective will require the resources and commitment of all groups in society, as symbolized by the diversity of participants in this hearing.

The policy measure proposed by critics of beer and wine advertising, a ban or mandatory counter-advertising, are unwarranted and would not contribute to society's efforts to combat alcohol misuse. Broadcasters already exercise great care to ensure that all beer and wine advertisements are tasteful and do not encourage inappropriate use of alcohol. Moreover, scientific research links drinking behavior to a very complex array of psychological and physiological factors. Compared to these factors, broadcast advertising exerts the weakest or non-existent influence on drinking. Furthermore, no credible evidence links broadcast advertising to the actual problems caused by misuse of alcohol.

The experience with banning cigarette advertising in the United States and the failure of beer and wine advertising bans to reduce alcohol misuse in other countries demonstrates that bans on beer and wine advertising in the United States would have no effect on reducing the problems related to misuse of alcohol.

Similarly, a mandatory counter-advertising requirement would place Congress in the role of dictating broadcasters' editorial and programming judgements, contrary to decades of broadcast regulatory policy and contrary to the basic premise underlying the First Amendment, "a free and unfettered press." A counter--advertising requirement would set a precedent that Congress would be pressured to apply to a plethora of other products that may present health risks when misused. Finally, mandatory counter-advertising forces broadcasters to accord special treatment to product-related causes, to the likely detriment of airtime for other equally worthy charitable causes.

Through voluntary action, broadcasters are heavily involved in the fight against alcohol and drug abuse. Congress can continue to look to the broadcasting industry for leadership and responsiveness to this important societal concern.

[COMMITTEE NOTE.—Appendix A attached to this statement entitled "Recommendations of the Staff of the Federal Trade Commission—Omnibus Petition for Regulation of Unfair and Deceptive Alcoholic Beverage Advertising and Marketing Practices" is retained in committee files.]

FINAL DRAFT
Supersedes Preliminary Draft

THE MODEL ALCOHOLIC BEVERAGE RETAIL LICENSEE LIABILITY ACT OF 1985

(Model Provisions and Commentaries)

Prevention Research Group
Medical Research Institute
of San Francisco
2532 Durant Avenue
Berkeley, CA 94704

Preparation was supported by Grant # R01 AA0621-01 (Prevention Research: Server Intervention and the Law) to the Medical Research Institute of San Francisco.

APPENDIX C

AN ACT REGARDING THE ESTABLISHMENT OF ALCOHOL SERVER TRAINING PROGRAMS

SECTION 1. The Formation and Purpose of the Regulation Board. The Alcoholic Beverage Control Commission, hereinafter referred to as the Commission, shall establish a Regulation Board with representation from the Commission, the Department of Public Safety, the Attorney General, the Division of Alcoholism, the Massachusetts association of hotels, restaurants, bars, taverns and package stores, the association of insurance companies, and the directors of any regional offices as shall be described forthwith. This board shall regulate the development of training courses and materials, the examinations and examination procedures, the fee structure, enforcement procedures, penalties and fines.

The Regulation Board shall, as necessary, establish regional offices for the purpose of education and consultation, examination administration, and coordination of enforcement of the permit system as defined in this chapter.

SECTION 2. Implementation. Upon passage of this act, the Regulation Board shall be formed and shall, during the first two years of this act, work with the Commission in establishing training courses and materials, the examinations and examination procedures, the fee structure, enforcement procedures, penalties and fines, and certification procedures for instructors and schools. The Commission and Regulation Board shall also oversee the establishment and licensing of regional schools, for the purpose of providing training courses which shall be evaluated and modified to provide the most comprehensive and efficient training. Participation in these programs shall be voluntary, but shall fulfill the requirements of this act for the purpose of obtaining a permit as described forthwith. During the third and subsequent years of this act, the Commission shall require that all applicants for new licenses issued under Massachusetts General Law Chapter 138 Sections 12, 12a, 13, 14 and 15 shall demonstrate that all managers and employees have attended an approved training school, and that such employees shall have permits for being employed in establishments licensed under Massachusetts General Law Chapter 138 sections 12, 12a, 13, 14 and 15 as described forthwith. Also, during the third and subsequent years of this act the Commission shall require that all applicants for renewed licenses issued under Massachusetts General Law Chapter 138 Sections 12, 12a, 13, 14 and 15 shall demonstrate that all managers and employees have attended an approved training school, and that such employees shall have permits for being employed in establishments licensed under Massachusetts General Law Chapetar 138 Sections 12, 12a, 13, 14 and 15 as described forthwith until such time that all persons employed by establishments licensed under Massachusetts General Law Chapter 138 Sections 12, 12a, 13, 14 and 15 shall have permits as described forthwith.

SECTION 3. Permits for Servers of Alcoholic Beverages or Wines and Malt Beverages to be Drunk on the Premises. The Commission may annually grant to individual citizens of the Commonwealth employed as managers, bartenders, waiters, waitresses or other such persons responsible for serving alcoholic beverages to be drunk on the premises of licensees under section 12, 12A, 13 and 14 permits which shall authorize such employees to serve alcoholic beverages, and the fee for each permit shall be determined annually by the Commission and the Regulation Board. The Commission and Regulation Board may make and enforce rules and regulations covering the granting of permits under this section and regulating the exercise of the authority granted under such permits.

SECTION 4. Permits for Servers of Alcoholic Beverages or Wines and Malt Beverages Not to be Drunk on the Premises. The Commission may annually grant to individual citizens of the Commonwealth employed as managers and sales clerks or other such persons responsible for serving alcoholic beverages not to be drunk on the premises for licensees under section 15 permits which shall authorize such employees to serve alcoholic beverages and the fee for each permit shall be determined annually by the Commission and Regulation Board. The Commission and Regulation Board may make and enforce rules and regulations covering the granting of permits under this section and regulating the exercise of the authority granted under such permits.

SECTION 5. Application and Issuance of Permits for Dispensing Alcoholic Beverages. Application for a permit to serve alocholic beverages as described in sections 3 and 4 may be made by any person except a person who has been issued a permit and whose permit is not in force because of revocation or suspension or whose permit is suspended by the Commission; but before such a permit is granted, the applicant shall pass such application as to his/her qualifications as the Commission and Regulation Board shall require, and no permit shall be issued until the Commission is satisfied that the applicant is a proper person to receive it and no permit shall be issued to any person who is not of the legal age to serve or dispense alocholic beverages as defined by Massachusetts General Law.

The applicant shall also be required to demonstrate he/she has successfully completed an alcohol education and training course approved by the Commission and Regulation Board. The aforesaid examination and alcohol education and training course shall be administered for each of three classifications of permit: 1)package store clerk 2)bartender, waitress/waiter or 3)manager. To each permittee shall be assigned some distinguishing number or mark; and the permits issued shall be in such form as the Commission shall determine provided, however, that a person issued a permit for each of the three classifications shall receive a permit of a different color. They may contain special restrictions and limitations. They shall contain a photograph of the permittee, the distinguishing number or mark assigned to the permittee, his/her name, his/her place of residence and address, and a brief description of him/her for purposes of identification and such other information as the Commission shall deem necessary. A person to whom a permit has been issued under this section shall not perform duties in a position other than that for which such permit has been made valid by the Commission. Every person issued a permit to perform in the job categories as aforesaid shall endorse his/her usual signature on the margin of the license in the space provided for the purpose immediately upon the receipt of said permit, and such permit shall not be valid until so endorsed. A permit or any renewal thereof issued to a server shall expire on an anniversary of the operator's date of birth occurring more than twelve months but not more than sixty months after the effective date of such permit. The permit issued to a person born on February twenty-ninth shall, for the purpose of this section, expire on March first. Every application for an original permit filed under this section shall be sworn to by the applicant before a justice of the peace or notary public. Any applicant shall be permitted, at his/her request, to take any written examination in connection with the issuance of such a license in a language other than English.

SECTION 6. Forgery or Alteration of Servers Permit; Penalty; Suspension; and Reinstatement of Permit. Whoever falsely makes, alters, forges or counterfeits, or procures or assists another to falsely make, alter, forge or counterfeit a permit to serve alcoholic beverages; or whoever forges or without authorization uses the signature, facsimile of the signature, or validating signature stamp of the Commissioner upon a genuine or falsely made, altered, forged or counterfeited permit to serve alcoholic beverages; or whoever has in his/her possession, or utters, or publishes as true, or in any way makes use of a falsely made, altered, forged or counterfeited permit; and whoever has in his/her possession, or utters, or publishes astrue, or in any way makes use of a falsely made, altered, forged or counterfeited permit; and whoever has in his/her possession, or utters, or publishes as true or in any way makes use of a falsely made, altered, forged or counterfeited signature, facsimile of the signature or validating a signature stamp of the Commissioner, shall be punished by a fine of not more than five hundred dollars or by imprisonment in the state prison for not more than five years or in jail or house of correction for not more than two years.

A conviction of a violation of this section shall be reported forthwith by the court or magistrate to the Commission who shall suspend immediately the permit to serve alcoholic beverages of the person so convicted; and no appeal, motion for new trial or exceptions shall operate to stay the suspension of the permit. The Commission, after having suspended the permit to serve in accordance with this paragraph, shall not terminate such suspension nor reinstate the right to serve alcoholic beverages until one year after the said conviction provided, however, that if the prosecution of such a person has terminated in his/her favor, the Commission shall forthwith reinstate his/her permit to serve alcoholic beverages.

SECTION 7. Examinations.

a. No person shall be issued a permit to serve alcoholic beverages unless he/she shall have passed an examination conducted by the Commission.

b. Examinations shall be written in the English language unless a second language is required as determined by the needs of the candidate. Examinations may also be administered using word processing or video equipment in those locations where such equipment is available.

c. Examinations shall be held at least twelve times a year. Additional examinations may be scheduled at the discretion of the Regulation Board with at least sixty days public notice.

d. Time allowed for the examinations will be set forth in the instructions to examinees.

e. Applicants will be given written notice when and where to appear for the examination.

f. The following examination rules will prevail, and violation of any part will be considered grounds for disqualification of the applicant:

1. Examinees will not be permitted the use of books or memoranda during the examination.
2. The copying of questions or making of notes relative thereto is prohibited during the examination.
3. No one shall be permitted to remove from the examination room copies of the examination prior to or subsequent to the examination.
4. Examinees shall not leave the examination room for any reason until they have returned in to the person conducting the examination the complete examination papers and any other material relating thereto.

g. The results of the examination shall be mailed to the applicant.

h. The examination papers written by the applicant will not be returned to the applicant, and the applicant will not be permitted the examination papers except by making a written appeal to the Regulation Board.

i. Any appeal of the results of the examination must be filed in writing with the Regulation Board within fifteen days of notification of the results of the examination.

j. Applicants who fail to pass an examination may reapply for examination in no less than sixty days of notification of the results of the examination.

k. Reissuing of a permit by examination will be required for the initial permit and again every five years. In considering applicants for a renewed permit, the Regulation Board shall take into account every five years each candidate's continuing experience, education, training and maintenance of professional skills. Candidates not showing evidence of maintaining standards satisfactory to the Regulation Board shall be required to pass a written examination to sustain their present status.

The Commission and Regulation Board shall prescribe such reasonable rules and regulations as may be deemed necessary to carry out the provisions of this section.

Every licensee shall keep such records as the Commission and Regulation Board may by regulation require. The records of the licensee shall be open to the inspection of the Commission or Regulation Board or their representatives at all times during reasonable business hours.

No persons shall be employed by a licensee as an instructor, nor shall any persons give instruction for hire in the serving of alcoholic beverages unless such a person is the holder of a certificate issued by the Regulation Board. Such certificate shall be issued only to persons qualified as described forthwith.

SECTION 8. Application for License to Give Instruction for Hire in Alcohol Server Schools: Fee: Qualifications of Applicant: Suspension or Revocation of License or Instructor's Certificate. No person shall engage in the business, hereinafter called Alcohol Server School, of giving instruction for hire in serving alcoholic beverages without being licensed by the Commission and the Regulation Board. A seperate license shall be secured for each place of business where a person operates an Alcohol Server School. Application for a license under this section may be filed with the Commissioner and shall contain such information as required by the Commission and Regulation Board. Every such application shall be accompanied by an application fee of fifty dollars, which shall in no event be refunded. If an application is approved by the Commissioner and Regulation Board, the applicant upon the payment of an additional fee the amount of which shall be determined annually by the Commission and Regulation Board shall be granted a license, which shall be valid for a period of one year from the date of its issuance. The annual fee for renewal of such license shall be determined annually by the Commission and Regulation Board. The Commissioner shall issue a license certificate to each licensee, which certificate shall be conspicuously displayed in the place of business of the licensee. In case of the loss, mutilation or destruction of a license certificate, the Commissioner shall issue a duplicate certificate upon proper proof thereof and payment of a fee of twenty-five dollars.

No license shall be issued to a person to conduct an Alcohol Server School as an individual unless he/she shall have been the holder of an instructor's certificate issued by the Commissioner under this section for at least two years, nor shall such a license be issued to a partnership unless at least one of the partners shall have held such a certificate for at least two years, nor to a corporation unless at least one of the directors shall have held a certificate for at least two years. The provisions of this paragraph shall not apply during the first two years of this act during which time the Commission and Regulation Board shall determine the necessary requirements for issuance of a license.

The Commission may deny the application of any person for a license, if, in his/her discretion, s/he determines that:

a. Such applicant has made a material false statement or concealed a material fact in connection with his/her application.

b. Such applicant, any officer, director, stockholder or partner, or any other person directly or indirectly interested in the business was the former holder, or was an officer, director, stockholder or partner, in a corporation or partnership which was the former holder of an Alcohol Server School license which was revoked or suspended by the Commissioner.

c. Such applicant or any officer, director, stockholder, partner, employee, or any other person directly or indirectly interested in the business, has been convicted of a felony, or of any crime involving violence, dishonesty, deceit, indecency, degeneracy or moral turpitude.

d. Such applicant has failed to furnish satisfactory evidence of good character, reputation and fitness.

e. Such applicant is not the true owner of the Alcohol Server School

f. Such applicant or any officer, director, stockholder, partner, employee, or any person directly or indirectly interested in the business is the holder of a current license to serve alcoholic beverages for on or off premises consumption in the Commonwealth.

The Commissioner may suspend or revoke a license or refuse to issue a renewal thereof for any of the following causes:

a. The conviction of the licensee or any partner, officer, agent or employee of such licensee of a felony or of any crime involving violence, dishonesty, deceit, indecency, degeneracy or moral turpitude.

b. Where the licensee has made a material false statement or concealed a material fact in connection with his/her application for the license or renewal thereof.

c. Where the licensee has failed to comply with any of the provisions of this section or any of the rules and regulations of the Commissioner made pursuant thereto.

d. Where the licensee or any partner, officer, agent or employee of such licensee has been guilty of fraud or fraudulent practices in relation to the business conducted under the license, or guilty of inducing another to resort to fraud or fraudulent practices in relation to securing for him/herself or another a permit to serve alcoholic beverages.

e. For any other good cause.

The term "fraudulent practices" as used in this section shall include but shall not be limited to any conduct or representation on the part of the licensee or any partner, officer, agent or employee of a licensee tending to induce another or to give the impression that a permit to serve alcoholic beverages may be obtained by any other means other than those prescribed by law or furnishing or obtaining the same by illegal or improper means or requesting, accepting, exaction or collecting money for such purpose.

Notwithstanding the renewal of a license, the Commissioner may revoke or suspend such license for causes and violations as prescribed by this section and occurring during the two license periods immediately preceding the renewal of such license.

Except where a refusal to issue a license or renewal or revocation or suspension is based solely on a court conviction or convictions, a licensee or applicant shall have an opportunity to be heard, such hearing to be held at such time and place as the Commissioner shall prescribe.

A licensee or applicant entitled to a hearing shall be given due notice thereof. The sending of a notice of a hearing by mail to the last known address of a licensee or applicant ten days prior to the date of the hearing shall be deemed due notice.

SECTION 9. Certification of Instructors for Alcohol Server Schools. The Regulation Board shall have authority to grant upon application provisional and permanent certificates, as provided in this section, to instructors of Alcohol Server Schools licensed under this chapter. Each application shall be accompanied by a fee to be determined annually by the Regulation Board.

Any applicant shall be eligible for a provisional or a permanent certificate who satisfied the requirements of this section and who furnishes the Regulation Board with satisfactory proof that he/she 1)is an American citizen, 2)is of sound moral character, 3)possesses a bachelor's degree or an earned higher academic degree or is a graduate of a four year normal school approved by the Regulation Board and 4)meets such requirements as to courses of study, semester hours therein, experience, advanced degrees and such other requirements as may be established and put into effect by the Regulation Board; provided, however, that no requirements as to courses of study, semester hours therein, experience, advanced degrees and other such requirements shall take effect prior to one year subsequent to the promulgation of such requirements by the Regulation Board.

The first certificate which the board may grant to any eligible applicant shall be a provisional certificate for two years from the date thereof. Before the Regulation Board grants any other certificate, the applicant shall be evaluated by an evaluation committee in the manner hereinafter provided.

Each evaluation committee shall be selected by and under the auspices of the Regulation Board and shall consist of persons who hold a permanent certificate. Each evaluation committee shall consist of three persons, one of whom shall be appointed by the Regulation Board, one nominated by the applicant and the third shall be appointed by the other two members of the evaluating committee from professionals in the same field as the applicant or as closely allied thereto as possible.

Before an applicant completes a second year of service under his/her provisional certificate, he/she shall be evaluated by the evaluation committee described in the preceding paragraph as to his/her readiness to obtain a permanent certificate in terms of his/her professional growth and performance. Any evaluation made by the evaluation committee shall be based on criteria determined by the Regulation Board.

The evaluation committee may recommend to the Regulation Board that the applicant be granted a permanent certificate; and if the applicant has met all the other requirements established by the board, the board shall grant the applicant a permanent certificate.

The evaluation committee may, as one of its alternatives, recommend that the applicant's provisional certificate be renewed for an additional two years; and if the applicant has met all the other requirements established by the Regulation Board, the board shall grant the applicant a renewal of his/her provisional certificate for two years. No renewal certificate may be granted thereafter. During his/her second year of service under a renewed provisional certificate, the applicant shall be reevaluated in accordance with the provisions that govern the evaluation of an applicant under an initial provisional certificate.

If the evaluation committee recommends that a renewal of the original provisional certificate shall not be granted to an applicant, or if the evaluation committee recommends that a permanent certificate shall not be granted to an applicant, or if the board denies a renewal of a provisional certificate or of a permanent certificate to an applicant because he/she has not met all the requirements for eligibility as provided in this section, the Regulation Board shall notify the applicant of the adverse recommendation of the evaluation committee or the denial for certification by the Regulation Board; and such notice shall be accompanied by a report of the evaluation committee or a report of the reasons for the denial of certification by the Regulation Board, as the case may be, and a description of the procedures by which the applicant may initiate an appeal before a hearing officer; and such notice shall be mailed to the applicant by registered or certified mail not later than thirty days from the date of the meeting of the evaluation committee.

Notwithstanding any provisions of this section to the contrary, a person whose application for a renewal of a provisional certificate or whose application for a permanent certificate has been denied by the Regulation Board may submit a new application for certification in accordance with the provisions of this section at any time subsequent to two years after the expiration date of his/her last certificate. A person whose provisional certificate has expired, provided the Regulation Board has not denied the issuance of a provisional or permanent certificate, may reapply for a provisional certificate immediately.

For the purpose of certifying provisional instructors, the Regulation Board may approve programs at colleges or universities devoted to the preparation of instructors for Alcohol Server Schools. A college or university offering such an approved program shall certify to the Regulation Board that a student has completed the program approved and shall provide the Regulation Board with a transcript of the person's record.

Any certificate issued by the Regulation Board may be revoked for cause, pursuant to standards and procedures established by rules and regulations of the Regulation Board.

The Regulation Board shall have authority from time to time to make, amend and rescind such rules and regulations as may be necessary to carry out the provisions of this section.

SECTION 10. Curriculum of Alcohol Server Training Schools. The curriculum of Alcohol Server Schools shall be determined by the Regulation Board and shall include, but not be limited to, the following:

Level 1: Package Store Clerks (9 hour minimum)

Alcohol as a drug and its effects on the body and behavior, especially driving ability. Blood alcohol content (BAC).

Effects of alcohol in combination with commonly used drugs, legal, illegal, prescription and nonprescription.

Recognizing the problem drinker and community treatment programs and agencies.

Massachusetts General Law for package stores, especially the alcoholic beverage laws such as sale to minors, sale to intoxicated persons, sale for on/off premise consumption, hours of operation and penalties for violation of these laws. The drunken driving laws and third party liability.

Level 2: Bartenders, waitresses and waiters (15 hour minimum)

Same as Level 1 plus-

Intervention with the problem customer. Communication skills for intervening with the intoxicated customer. Ways to cut off service and protect the customer. Alternative means of transportation to get the customer home safely. Ways to deal with the belligerent customer.

More comprehensive understanding of the Massachusetts General Laws pertaining to sale of alcoholic beverages.

Knowledge of mixology. Storage and service of various alcoholic and non-alcoholic beverages.

Sanitation procedures, refrigeration and public health policies.

Level 3: Managers (30 hour minimum)

Same as Levels 1 and 2 plus-

Legal responsibilities of licensees.

Recognition of signs and symptoms of problems with employees. Development of Employee Assistance Programs.

Advertising and marketing for safe and responsible drinking patterns. Standard operating procedures for dealing with problem customers.

Record keeping for fulfilling statutory obligations.

Understanding of management practices and their relation to safe and responsible drinking patterns including the number of employees on the job, the number of patrons allowed on the premises, the interior design, hours of operation, and the use of promotional techniques.

SECTION 11. Penalties for Violation of this Chapter. The Commission and Regulation Board shall establish guidelines for fines and penalties of violations in this chapter. These shall include, but not be limited to, the following violations:

Establishments employing workers without the proper permits.

Employees working without proper permits

Employees working with permit suspended or revoked.

Employees not having permit available for inspection by Commission or Regulation Board.

Employees with permit convicted of violating a statute related to sale of alcoholic beverages, such as sale to minor, sale to intoxicated person, sale after hours, etc.

[10]SECTION 12. Funding for Administration, Implementation and Enforcement of this Chapter. Fees collected under this chapter shall be used for the administration and enforcement of this system. These funds shall also be used for the development of educational programs and materials. Additional funding shall come from licensing fees, fines from drunken drivers, fines and penalties from violations of this chapter, and private sources such as restaurant and package store associations, insurance companies, brewers and distillers.

There shall be a scholarship fund established for those applicants with a demonstrated need who have to attend an education course. Money awarded from this fund shall be reimbursed by the individuals after employment has been obtained.

SECTION 13. Employee Manual. All establishments licensed under this act will be required to have a manual prepared by the Regulation Board on the premises at all times and available to all employees. The manual will detail all the information required for the passage of the permit examination as described in this chapter. In addition, the manual will describe specific situations encountered by bartenders, waiters and waitresses and package store clerks with alternative methods of dealing with these situations so as to avoid liability. There will also be specific suggestions for marketing safe, responsible drinking patterns in customers.

[illegible]

NATIONAL COLLABORATION FOR YOUTH
An affinity group of The National Assembly of National Voluntary Health and Social Welfare Organizations, Inc.

134 Connecticut Avenue, N.W. • Suite 424A • Washington, D.C. 20036 • (202) 296-1515

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National Board, YWCA
of the U.S.A.
The National Network of
Runaway and Youth Services, Inc.
National Youth Work Alliance
United Neighborhood Centers
of America, Inc.
YMCA of the USA

MAY 3 1985

May 2, 1985

The Honorable George Miller
Chairman
House Select Committee on Children,
Youth and Families
385 House Office Building Annex 2
Washington, D.C. 20515

Dear Mr. Miller:

Once again the House Select Committee on Children, Youth and Families is to be commended for its outstanding work. Your commitment to tackling those hard issues -- from child abuse and day care to teen parenting -- has been so important. The recent hearing by the Committee on alcohol abuse prevention and the family is just another example.

The National Collaboration for Youth shares your concerns. Enclosed for your convenience, is a copy of the Collaboration's policy statement on Substance Abuse which includes alcohol abuse prevention.

The Collaboration stands ready to assist you and The Select Committe in this and other issues of concern for children and youth.

Sincerely,

KMHendricks
Karen M. Hendricks
Program Associate

KMH:jh
Enclosure

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POLICY STATEMENT: SUBSTANCE ABUSE

November 1984

NATIONAL COLLABORATION FOR YOUTH

POLICY STATEMENT: SUBSTANCE ABUSE

Issue: An emphasis on prevention and on treatment in the area of substance use and abuse.

NCY Policy Statement *

The National Collaboration for Youth supports the following:

1. Federal leadership in the development of smoking, alcohol and drug abuse prevention policies, programs and funding is essential because of the pervasive and devastating effects on our nation's youth and their families;

2. Activities and educational programs which will discourage drunk driving and work towards making driving under the influence of alcohol socially unacceptable;

3. Recognition of community-based, youth serving agencies as leaders in providing substance abuse prevention programs for young people;

4. Programs that encourage linkage amoung youth-serving organizations, the family and schools.

5. Prevention programs that include the following:

   . Involvement of youth in planning and implementing substance abuse prevention program.

   . Involvement of parents or guardians, agency staff and agency decision makers.

   . Program activities that are broad enough to address the social, cognitive, attitudinal and personality variables associated with adolescent alcohol, drug or smoking use.

   . A clear, consistent "don't do" message communicated by parents, other adults, and agency staff regarding the use of drugs, alcohol, and tobacco.

   . Prevention efforts that help to create positive peer pressure among youth and parents, making abstinence both acceptable and desirable.

   . Techniques that help youth develop social skills which lead to improved personal and social competence in such areas as enhanced self-esteem, communication with others, coping with stress, etc.

*Approved by the NCY Executives 11/1/84

- Youth learning, practicing and applying prevention skills such as assertiveness which will help them analyze and resist peer pressure.
- Cognitive information and skill building for parents that will enhance parent-child communication.
- A prevention program should begin before the age of onset of these behaviors.

Background

A. Statement of Issue

The National Collaboration for Youth (NCY) has been concerned about substance abuse among young people since the organization's inception. NCY has a strong commitment to prevention of these youth crisis situations as stated in the National Youth Goals booklet in 1978.

(1) "Alcohol abuse is the number one youth drug problem today," according to the National Institute on Alcohol Abuse and Alcoholism (NIAAA). The dimensions of the teenage drinking problem were underscored by two nationwide surveys conducted for NIAAA by the Research Triangle Institute. Approximately 19% of the 10th to 12th graders interviewed in 1974 were either at the "substantial risk" level or were already problem drinkers.

A 1979 survey conducted for the National Institute on Drug Abuse found that alcohol is the drug students try most often and are most likely to continue to use. More than twice as many teenagers and young adults regularly drink alcoholic beverages as regularly use other drugs.

There are an estimated 3 million teenage problem drinkers in the U.S. The young problem drinker, as distinguished from typical adolescent drinkers, uses alcohol more often, in larger amounts, and usually for the purpose of getting drunk. He or she is also more likely to display aggressive or destructive behavior and to drink alone. Excessive drinking is generally related to emotional problems. Many young people may have their lives totally disrupted by drinking. "It's not so much the drinking itself, although we're concerned about that -- it's the consequences of the drinking," says psychologist Patricia O'Gorman, former director of the NIAAA's Division of Prevention.

Alcohol abuse and its noted health hazard, drunk driving, are problems that pervade all age groups of our driving population but are especially severe for teenagers. The combination of learning how to drive, youthful risk-taking behavior and drinking accounts for drunk driving being a major killer of teenagers in this country. Between 45 and 60 percent of all fatal crashes involving a driver are alcohol related. Teenage drivers were involved in 1 out of every 5 fatal accidents in 1980.

In response to these tragic statistics, at least 14 of the 27 states that lowered their legal drinking ages have raised them again during the past two years. Federal legislation was passed that provides direct incentives to states to raise the drinking age to twenty-one through the withholding of federal highway funds.

A number of groups have developed an advocate for stronger drunk driving laws and/or to work towards making driving under the influence of alcohol unacceptable. These groups include Mothers Against Drunk Driving, Students Against Drunk Driving, and the National Commission Against Drunk Driving.

According to a 1978 study conducted by the Research Triangle Institute, parents' drinking practices and attitudes toward teenage drinking have a definite effect on drinking by teenagers. Eighty-five percent of senior high school students had at least one parent who they believed drank alcoholic beverages. Students' drinking levels were associated with their perceptions of their parents' drinking behavior. An estimated 59% of all students with at least one parent who they believed drank regularly were themselves moderate or heavy drinkers.

Of particular concern are the effects of alcohol on pregnant young women and their unborn babies. Children of women who drink alcohol may be born with a recognizable pattern of growth, mental and physical birth defects known as "fetal alcohol syndrome." Alcohol in any form - beer, wine or hard liquor - quickly crosses the placenta to reach the unborn baby. It is not known how much alcohol is too much or too little, or if any amount is safe.

Educators have tried several different approaches to alcohol education over the years, including factual lectures and scare tactics. Many believe that the most effective education and prevention methods are those that help young people develop refusal skills. They favor programs that focus on clarifying values, solving problems, recognizing one's feelings, coping with anxiety and developing self-esteem.

Educators also believe it is important for programs to present alternatives to drinking and to encourage young people to understand the role that drinking plays in American society. In The Young Alcoholics, Tom Alibrandi wrote that it is important for alcohol education programs to dispel myths about alcoholism in terms young people can understand. "When presenting information about alcohol," he added, "it is equally important to point out what constitutes social drinking, thus setting a standard of accepted alcohol use."

Ideally, alcohol education and prevention is a cooperative venture, with parents, schools and the community participating. Such comprehensive programs can educate adults as well as teenagers about alcohol and its abuse and also give adults the opportunity to re-examine their own drinking attitudes and behavior.

(2) The United States has the highest level of marijuana use among people of any developed country in the world. According to the National Institute of Drug Abuse statistics, more than seven million young people between the ages of 12 and 17 - 31% of that age group - report having tried marijuana more than once. Among high school seniors, over 60% have tried marijuana (1980).

Although it appears that marijuana use among young people may be declining slightly, the extent of drug use remains a significant problem. This is because young people are particularly vulnerable to the physiological and psychological side effects of all drugs, marijuana included.

Of growing concern is the use of drugs such as cocaine. Between 1972 and 1982, the percentage of youths age 12-17 who had tried cocaine increased from 2% to 7%. Among young adults 18-25, the figures rose from 9% to 28%.

In the last seven years, more than 4000 parent groups in the U.S. have organized to fight drugs, particularly marijuana, which they see as the key drug. They have banded together as the National Federation of Parents for Drug-Free Youth. The federation shows parents how to organize themselves to fight drug abuse. First Lady Nancy Reagan's interest in the prevention of drug abuse is well known.

(3) In a 1980 article in the Journal of School Health, Hamrich, Anspaugh and Smith said, "The discrepancy between personal health behavior and general health knowledge is one of the most publicized and best documented dilemmas in the field of health education." Nowhere is this discrepancy wider than between what school children know and what they do about smoking. Study after study builds the case against tobacco and proves that students realize smoking damages their health. Yet, they continue, and the age at which they start gets lower every year. With good cause, health educators wonder why students intentionally begin the deleterious life-long tobacco habit. Cigarette smoking is the single most significant preventable factor contributing to illness, disability and death in the United States.

Research on this enigma uncovers several reasons for precocious tobacco use. The influence of future expectations crops up in findings that 60% of preschoolers think they will smoke as adults. As Nuehring and Markle recently observed, "Smoking was not only accepted behavior, it was socially desirable, even necessary, in some subcultures." Others affirm a "child is not likely to have personal values opposed to smoking, nor does his social environment lend support to nonsmoking behavior." Williams and Shor stated: "For many teen-agers smoking appears to constitute a "right [sic] of passage' into adulthood." National surveys find "56.5% of teenagers (erroneously) believed that 'over one-half of girls at school smoke', . . . and 83% of the teenagers indicated that they usually think of teen-agers as smokers rather than as nonsmokers." The notion that smoking is normal instead of exceptional further explains why one in three school students use tobacco.

In 1979, about 12 percent of all young people - 3.3 million in all - were regular smokers. A regular smoker was defined as someone who had at least one cigarette per week. In 1979, approximately 90 percent of current regular teenage smokers used cigarettes daily.

Traditionally, the prevalence of cigarette smoking among males has been higher than among females. However, patterns of cigarette smoking among both males and females have changed. The rates are decreasing for male and female adults, as well as for teenage boys and girls. While the prevalence of smoking among teenage boys and girls is decreasing, rates among teen-age boys are declining more rapidly. The percentage of male smokers aged 12 to 18 between 1974 and 1979 decreased from 15.8% to 10.7%. During the same period, the percentage of female smokers of the same age decreased from 15.3% to 12.7%. As a result, a higher proportion of females (12.7%) than males (10.7%) between the ages of 12-18 were smoking cigarettes in 1979. It is also suspected that cigarette smoking is more prevalent among college females than college males. A continuation of present trends in cigarette smoking could lead to more female smokers than male smokers in all age groups. In addition, the cessation rate has been consistently lower for women than men.

Although the rate of smoking among teenagers declined during the latter part of the 1970s, recent figures from National Institute on Drug Abuse (NIDA) indicate a possible deceleration of this downward trend. It was reported that in 1982 13% of male high school seniors smoked a half a pack or more of cigarettes per day, while nearly 15% of the female high school seniors did.

Social pressures have been found to play a major role in influencing adolescents to smoke. One study showed that peers, parents and the media were more important factors in influencing adolescents to begin smoking than was knowledge of long-term dangers of smoking. Furthermore, the major factor the students themselves report as influencing their decision to experiment with tobacco is peer pressure, and the direct influence from a favorite peer appears to be the most potent of these pressures.

However, these studies do not rule out the influence of parents on smoking behavior. They note that parental smoking is related to tobacco use by adolescents. This is supported by the work of Chassin, et al., who found that students who smoked were more likely to have mothers and fathers who smoked than students who did not smoke. Others found that if both parents smoked, the likelihood that the child would initiate smoking was greater than if only one or neither parent smoked. They also found that parental attitudes were an important factor in smoking behavior.

Young people emulate older siblings as well. A teenager with an older brother or sister who smokes is extremely likely to be a smoker. Young people who have both a parent and an older sibling who smoke are four times as likely to smoke as those who have no smoker in the immediate family. As the U.S. Public Health Service noted in its study of teenage smoking:

> Smoking appears to be one of those customs which families as a whole either adopt or not adopt. Just as in some families a coffee pot is always on the back of the stove, in some homes cigarettes are readily available for family members to help themselves.

In addition, young people are generally healthy and cannot identify with the concept of dying from a disease that may appear in 30 or even 50 years. The "now"-orientation of adolescents appears almost as a belief in immortality. The future holds much less concern for them than their immediate needs. Thus, knowledge of health risks may fail to influence decisions about their behavior.

In fact, becoming a smoker is immediately gratifying and valuable to many teenagers. Smoking often gives young people increased status among their friends who smoke, makes them feel more mature because smoking is considered an adult habit, and may serve as an act of defiance towards authority figures who have forbidden them to smoke. Smoking becomes a symbolic act reflecting their transition from dependent to independent beings.

In a 5-year study of teenage smokers completed in 1979, results indicate that the median age at which young smokers take up the habit is 16.4 years for males and 16.1 years for females.

Onset of smoking has been linked to the period in which young people begin to question the behavior codes laid down by parents. It is at this time that some parents begin to tolerate cigarette smoking by their maturing children. In addition, as students move from elementary to middle or junior high school, and on to high school, they are exposed to large numbers of older students and more frequent opportunities to smoke, as well as a social environment that supports smoking as a symbol of adulthood and independence. These transition points are important intervention opportunities for smoking education programs.

A study of high school seniors conducted by NIDA (date unknown) indicated that students who did not perform well academically were more likely to smoke and were also more likely to be enrolled in vocational courses, rather than in a college prepartory curriculum. Overall, the educational and occupational aspirations of high school students who smoked tended to be lower than those of nonsmoking students.

Since school plays a dominant role in the life of children and adolescents, the school environment provides its own set of factors that influence young people's smoking decisions. The content and message of the school's smoking education program, the presence or absence of smoking regulations and the smoking attitudes and behavior of teachers, coaches, nurses, and other administrative and support staff all may influence the student's smoking decision.

Although television and radio advertising of cigarettes was banned in 1971, tobacco companies still spent $800 million in 1978 promoting and advertising their products through American newspapers, magazines, billboards, and display cards. Most cigarette advertisements use young, attractive, athletic, and healthy-looking models. The tobacco companies deny that their ads are designed to influence young peoples' decisions about whether or not to begin smoking, but their portrayal of smokers as young, sexy, daring, and sophisticated may well affect smoking decisions made by adolescents.

Educators can serve to counteract the influence of cigarette advertisements by encouraging students to discuss and analyze their impressions of the models and message used in the ads. Programs can be designed in which students learn to dissect and disprove these messages, while also being taught the skills to combat them in their daily lives.

Of particular concern is the effects of smoking on women. Though the percentage of women smokers is declining, more women are smoking and smoking more heavily than they have in the past, causing lung cancer death rates to rise. By the end of this decade lung cancer will surpass breast cancer as the number one cancer killer among women. Pregnant women who smoke have a higher rate of miscarriage, stillbirths, premature births, and complications of pregnancy. More of their babies die soon after birth than those of non-smoking mothers. Babies born to smoking mothers generally are smaller in size and weigh less than babies born to non-smoking women.

In his statements about the National Drug Education Act, Rep. Solomon Ortiz refers to data that demonstrates a clear relationship between smoking cigarettes and using marijuana and other drugs. Among all teenagers in 1983, current cigarette smokers were 11 times more likely to be current marijuana users and 14 times more likely than non-smokers to be current users of heroin, cocaine, and/or hallucinogens.

It has been suggested that what is needed to prevent adolescent smoking is a comprehensive program that: (1) involves both family members and students; (2) provides factual information about the deleterious effects of smoking on health; and (3) addresses both the social and psychological factors which influence adolescents' attitudes and their initiation of smoking behavior. One such program is the Chicago Heart Health Curriculum Program (CHHCP).

General categories of current smoking education programs include:

-youth-coordinated projects,
-projects that illustrate the immediate effects of smoking,
-youth-to-youth teaching programs,
-lifestyle education,
-health-risk appraisal programs,
-health education curricula with smoking components,
-smoking cessation programs for youth.

B. Past legislative and funding history

In response to the growing need for research, NIAAA and NIDA were established as part of the National Institutes of Health. In mid-1982 Congress increased the federal excise tax on each pack of cigarettes for the first time in 31 years, doubling it.

- PL 98-252 - To designate June 1984 as "Student Awareness of Drunk Driving Month."
- S. 2615 - Alcohol Abuse, Alcoholism, and Drug Abuse Amendments of 1984.
- H.J. Res. 529, - To designate the week of September 23, 1984 through September 29, 1984, as "National Drug Abuse Education and Prevention Week."

C. Reason for NCY Interest

The NCY is interested in the prevention of substance abuse because our agencies are committed to the healthy development of the youth that we serve. The member agencies have a strong history of meeting the health needs of children and youth, particularly through programs which focus on primary prevention rather than treatment. Since many youth problems are interrelated, prevention programs that address one or two areas can have a dramatic effect on other areas.

D. Importance of NCY Involvement

It is important for NCY to address the prevention of substance abuse to focus attention on the expertise of the member agencies. The diversity of the Collaboration means that NCY has the capacity to develop programs at all levels; from the grassroots level to the national level. Because youth-serving agencies serve youth at critical stages in their development, primary prevention efforts continue to be unique contributions by the NCY. Collaborating on the realignment of traditional methods of dealing with urgent youth problems is one of the best examples of the need for mobilizing our collective resources.

Current Status

A. Legislative and funding status

- H. R. 3979 - Comprehensive Smoking Education Act.
- H. R. 4851 - National Drug Education Act.
- H. R. 5383, S. 2719 - Uniform Minimum Drinking Age Act of 1984.
- H. R. 5413 - Alcohol Abuse, Drug Abuse and Mental Health Amendments of 1984.
- H.R. 5637 - National Drunk Driving Prevention Act.

B. Programs of NCY member agencies addressing the problem.

a. American Red Cross

Safe Rides is a transportation service run by young people in several Connecticut communities that offers teens an alternative to driving when they've had too much to drink. The young people use the Red Cross chapter as "home base", Red Cross vehicles, and are required to take first aid as part of their training.

b. Girl's Clubs of America

YAAA Team is an alcohol and drug abuse prevention program developed by the Girls' Club of Arlington (TX) under a state grant from the Texas Commission on Alcoholism. As a result of its local success, the program has been used in youth organizations throughout the state of Texas and in other Girls' Clubs across the country. The project is aimed at youth between the ages of 6 and 18, with special emphasis on the preadolescent group between 10 and 14 years. The project utilizes peer education, leadership development and life management skills training to help young people explore viable alternatives to drug and alcohol use.

c. Boy Scouts of America

Personal Health Decisions is an optional program for Scouts in the San Diego Council which is intended to create awareness of the hazards of tobacco, alcohol, and drugs. The program is set up as a series of requirements leading to the attainment of a certificate, a patch, and a $300 scholarship at National University. Certain of the Boy Scout skill awards are included as part of the requirements. The basic strategy is to encourage the participant to search out health information at resource centers in the San Diego Area and then carry out projects and write reports.

Record of NCY Action on the Issue

Although there has been no NCY action on this issue, some agencies have supported specific legislation.

Sources

Alcohol and Youth: Parental Influence. (Facts for Planning, no. 6). Rockville: National Institute on Alcohol Abuse and Alcoholism, 1983.

Families and Futures. Future Homemakers of America, March of Dimes Birth Defects Foundation, 1984.

Nuehring, E., Markle, G.E. "Nicotine and Norms: The Reemergence of a Deviant Behavior," *Social Problems,* Vol. 21, 1974.

Page, Randy M. "Assessing Gender Differences in College Cigarette Smoking Intenders and Nonintenders," *Journal of School Health,* (Vol. 53, No. 9), Kent: American School Health Association, November 1983.

Popescu, Cathy Becker. *Smoking or Health: It's Your Choice.* Summit: American Council on Science and Health, 1984.

Schinke, Steven Paul. "Primary Prevention of Tobacco Smoking," *Journal of School Health,* (Vol. 53, No. 7), Kent: American School Health Association, September, 1983.

Smoking Programs for Youth. Bethesda: National Cancer Institute, National Institutes of Health, 1980.

Sunseri, Albert J., et al. "Reading, Demographic, Social and Psychological Factors Related to Pre-adolescent Smoking and Non-smoking Behaviors and Attitudes," *Journal of School Health,* (Vol. 53, No. 4), Kent: American School Health Association, April, 1983.

Ubell, Earl. "How You Can Help Turn Off Drug Abuse," *Parade Magazine,* March 4, 1984.

Williams, D.C., Shor, R.E., *The Social Support System of Smoking.* Paper presented at the 87th Annual Convention of the American Psychological Association, New York September. 1979.

Youth Problems. Washington: Congressional Quarterly Inc., 1982.

ALCOHOL POLICY LETTER

SEPTEMBER-OCTOBER, 1984

VOLUME 2, NUMBER 5

'21' REACTIONS OPINION

A Special Issue

THE AMENDMENT

"§ 158. National minimum drinking age

"(a)(1) The Secretary shall withhold 5 per centum of the amount required to be apportioned to any State under each of sections 104(b)(1), 104(b)(2), 104(b)(5), and 104(b)(6) of this title on the first day of the fiscal year succeeding the fiscal year beginning after September 30, 1985, in which the purchase or public possession in such State of any alcoholic beverage by a person who is less than twenty-one years of age is lawful.

"(2) The Secretary shall withhold 10 per centum of the amount required to be apportioned to any State under each of sections 104(b)(1), 104(b)(2), 104(b)(5), and 104(b)(6) of this title on the first day of the fiscal year succeeding the second fiscal year beginning after September 30, 1985, in which the purchase or public possession in such State of any alcoholic beverage by a person who is less than twenty-one years of age is lawful.

"(b) The Secretary shall promptly apportion to a State any funds which have been withheld from apportionment under subsection (a) of this section in fiscal year if in any succeeding fiscal year such State makes unlawful the purchase or public possession of any alcoholic beverage by a person who is less than twenty-one years of age

SOUTH DAKOTA BRINGS SUIT VS SECRETARY DOLE

Constitutionality of "21" brought into question

PIERRE, S.D.—On September 21, 1984, State Attorney General Mark V. Meierhenry brought suit against U.S. Transportation Secretary Elizabeth H. Dole, filing a complaint in behalf of the State of South Dakota in the Western Division of the U.S. District Court.

The suit challenges the constitutionality of the Surface Transportation Act of 1984, signed into law by President Reagan on July 17. Known also as Public Law No. 98-363, it contains an amendment designed to pressure states into raising the drinking age for all forms of beverage alcohol to 21.

The amendment, sponsored in the Senate by Frank R. Lautenberg (D-N.J.), provides for a two-year grace period in which states can vote to raise the drinking age to 21, followed (if they fail to do so) by a mandatory withholding of 5% of an offending state's highway aid in 1987 and 10% in 1988.

Calling drunk driving "an American catastrophe," Attorney General Meierhenry pointed out that an aggressive enforcement effort in South Dakota beginning in 1983 has resulted in a 30% drop in alcohol-related traffic deaths.

(continued on page 2)

U.S. NUMBER ONE IN TRAFFIC SAFETY

Amendment 158 to the 1988 Surface Transportation Act was explicitly passed to cut down drunk driving by younger people, a goal everyone shares. Indeed, highway safety in general is everyone's business and it is worth noting that, in a larger perspective, the United States is first among nations in having a low number of traffic deaths for miles driven (see table).

There are many factors responsible for this, says Dr. Robert L. Marshall, past president of the Alliance for Traffic Safety and now dean of Public Affairs and Continuing Education at Central Missouri State University. Chief among these factors, says Marshall, is the passage in 1966 and subsequent implementation of the Highway Safety Act, which called for a coordinated national program to reduce motor vehicle accidents and deaths.

Even before the passage of that act, traffic deaths had been steadily declining since 1923. In that year there were 18.2 deaths per 100,000,000 vehicle miles. By 1943, the figure was estimated at 11.1, dropping by 1953 to 7.1.

In 1963, there were 5.5 deaths per 100,000,000 miles. Yet with more people driving more miles, this was still an intolerable toll and in 1966 Congress passed the Highway Safety Act with its multipronged systems approach based on 16 areas. They are:

- periodic motor vehicle inspection
- motor vehicle registration
- driver education
- driver licensing
- codes and laws
- traffic courts
- alcohol
- identification and surveillance of accident locations
- traffic records
- emergency medical services
- highway design, construction and maintenance
- traffic engineering services
- pedestrian safety
- police traffic services
- debris hazard control
- accident investigating and reporting

(continued on page 62)

Motor Vehicle Death Rates

per 100,000,000 Kilometers of Travel in Selected Countries

Country	Rate
*Nigeria	33
Chile	17
Brazil	18
Kenya	16
South Africa	14
**Turkey	12
***Portugal	11
Hungary	9
Spain	7.5
Greece	6
Israel	5.5
Austria	5.3
****France	4.6
Germany	4
New Zealand	3.9
Australia	3.9
Netherland	3.5
*****Italy	3.3
Finland	3.0
Denmark	2.7
**Japan	2.7
Great Britain	2.3
Sweden	2.3
United States	2.0

*Death counted if the person dies within 30 days of the accident
**Death counted if the person dies within 24 hours of the accident
***Death counted if the person dies at the time of the accident
****Death counted if the person dies within 6 days of the accident
*****Death counted if the person dies within 7 days of the accident

Source: International Road Federation, Washington, D.C., 1980

◆ APL ◆

AUTO SAFETY

(continued)

Dr. Marshall points out that traffic deaths declined even more dramatically as progress was made in these areas of concern in a concerted fashion.

From 1967 to 1982, the death rate per 100,000,000 vehicle miles fell 49%—from 5.3 to 2.7.

"I attribute this decline," says Dr. Marshall, "largely to the utilization of the systems approach." The Alliance for Traffic Safety, he went on, sees "a trend toward a single issue approach (alcohol, safety restraints, etc.) rather than a continuation of the comprehensive systems approach." If certain single issues are emphasized, if policy makers seek so-called quick fixes, the Alliance fears, the remaining issues or standards will suffer. State highway safety agencies, they say, tend to stress issues emphasized by the federal government in order to receive available funds.

Some states, the Alliance says, are already beginning to seek to eliminate such standards as the 55 mph national speed limit, motorcycle helmet laws, driver education, and so forth.

"The systems approach has worked for the past 16 years," says Dr. Marshall. "Every effort should be made to continue."

The Alcohol Policy Letter is a bi-monthly publication of the Alcohol Policy Council, a nonprofit organization dedicated to a strategy of education and information in addressing alcohol issue problems.

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A major area of concern in traffic safety is, of course, alcohol, which is involved in some 50% of traffic accidents. The Alliance, Dr. Marshall says, agreed with the statement made in 1981 by the National Highway Traffic Safety Administration: "The drunk driver is a national problem, yet it can only be solved at the state and local levels. State and local law governs in this area and state and local courts are the only forum for the case... the crux of the drunk driver problem in most states is not lack of adequate laws on the drunk driver but the lack of consistent, convincing enforcement of those laws by state and local officials." ◆

NOBODY LISTENED

...the alarm of politicians and others is real and understandable. They are looking at odds, which is a reasonable approach when ages and maturity cannot be directly, perfectly equated. If raising the drinking age is deemed unduly discriminatory and/or intrusive, the concentration should be on strengthening and enforcing the laws involving the combination of drinking and driving, by anyone, regardless of age.

Washington Post
June 17, 1984

NEW ADVISORY BOARD MEMBER

Charles Morgan, Jr.

Augustus H. Hewlett, president of the Alcohol Policy Council, has announced the appointment of Charles Morgan, Jr., to the APC Advisory Board. Mr. Morgan, one of the nation's leading defenders of constitutional rights, represented the American Civil Liberties Union for more than 12 years, acting in defense of such clients as former heavyweight champion Muhammad Ali, controversial Vietnam war figure Capt. Howard B. Levy, and Georgia state legislator Julian Bond. He has argued many cases before the United States Supreme Court including *Reynolds vs. Sims*, the landmark, one person-one vote case. He is now in private practice in Washington, D.C.

Morgan is also author of two books and numerous articles in national publications, as well as being a much sought-after speaker.

"Along with Peter Barton Hutt," Hewlett said, "Charles Morgan brings to the board a thorough understanding of the legal-constitutional issues involved in regulatory measures and how these affect the people's attitudes toward alcoholic beverages, which are themselves key factors in the problems and opportunities we face." ◆

U.S. House of Representatives
SELECT COMMITTEE ON
CHILDREN, YOUTH, AND FAMILIES
385 House Office Building Annex 2
Washington, DC 20515

May 17, 1985

Ms. Sis Wenger
Alcohol and Drug Education Consultant
Southeast Michigan School district
3355 Broadway Boulevard
Birmingham, Michigan 48010

Dear Ms. Wenger:

This is to express my personal appreciation for your appearance before the Select Committee on Children, Youth, and Families at the hearing held jointly by the Prevention Strategies and Crisis Intervention Task Forces on May 2, concerning prevention of alcohol abuse. Your participation contributed greatly toward making the hearing a success.

The Committee is now in the process of preparing the transcript of the hearing for publication. It would be helpful if you would go over the enclosed copy of your testimony to make sure it is accurate, and return it to us within three days with any necessary corrections.
Also, Mrs. Boggs would appreciate your answering the following questions for the record.

1. Can you give us some specific examples of the presentations community education volunteers give to elementary school classes?

2. Are the volunteers trying to identify at risk children, such as children of alcoholics? How do you identify children of alcoholics through the school system without stigmatizing them?

Let me again express my thanks, and that of the other members of the Select Committee for your testimony.

Sincerely,

GEORGE MILLER
Chairman
Select Committee on Children,
Youth, and Families

Enclosure

alcohol/drug education

Sis Wenger
CONSULTANT

July 25, 1985

Mr. George Miller, Chairman
Select Committee on Children, Youth and Families
U. S. House of Representatives
385 House Office Building Annex 2
Washington, D.C. 20515

Dear Mr. Miller:

Enclosed is the corrected version of my verbal testimony before the Select Committee on May 2. You already have my written testimony, but am enclosing an additional copy for your convenience.

In answer to your questions from Mrs. Boggs regarding our school presentations and identifying children of alcoholics without stigmatizing them:

1. Our volunteers teach about alcoholism/addiction as a blameless disease which makes everyone in the family feel badly and for which there is help for all members of the family whether or not the addicted member gets help. We use films, stories, discussion circles, recovering alcoholics and recovering family members to demonstrate choices. In schools where there are support groups or counselors available who understand the special needs of children of alcoholics we include that information. We also include age-appropriate programs on intervention (caring about your friend), doing healthy things to make you feel good, etc.

   Whether the programs are for elementary, as you have asked about, or for older students, we always require faculty education prior to student education, as well as the presence of the teacher in the classroom to hear what the children hear and how they respond.

2. We do not teach that school personnel should identify children of alcoholics; rather, our philosophy is that education about the disease --- first to adults who influence children --- and about the various solutions available to those affected by it is the key. When children learn what it is that they live with, when they can label it without feeling guilty, and when school systems have resources available to them which give them permission to ask for help, the children of alcoholics will identify themselves. It happens consistently. The young lady from the Student Assistance Program who testified on my panel May 2 was eloquent proof of this. Such programs can work miracles all the way down to first grade if we educate the adults in the systems which impact our children.

Thank you again for the privilege of testifying.

Sincerely,
Sis Wenger

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